

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

05 MAR 27 PM 1: 14

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE

	STATE OF IDA <b>HO</b>
<ol> <li>The assumed business name which the undersigned</li> </ol>	ed use(s) in the transaction of
business is:	
magia 15 mato CLE ANIT	
MEGIN S MAID CREANIN	16
2. The true name(s) and business address(es) of the	entity or individual(a) dains
business under the assumed business name:	entity of individual(s) doing
Name	Complete Address
Maxia Flontoz 200.	•
SERE SERIES	NOWAHDR NAMPATO
	<u> </u>
3. The general type of business transacted under the	
<ol><li>The general type of business transacted under the a</li></ol>	assumed business name is:
Retail Trade Transportation and Pul	hlic I Itilities
Wholesale Trade Construction	one ounties
	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
	Basement West
<u> SAME</u>	PO Box 83720
<u> </u>	Boise ID 83720-0080
	208 334-2301
	<b>D</b> i
5. Name and address for this acknowledgment	Phone number (optional):
COPY is (if other than # 4 above):	
	Secretary of State use only
	costonly of outer use only
- 1 1 2 99a	
Signature: Marel Sunth	
(signature required)	-
Printed Name: Maria Fuente Page 1998 1998 1998 1998 1998 1998 1998 199	IDAHO SECRETARY OF STATE
Signature:	CK: CASH CT: 158010 BH: 945686

1 8 25.00 = 25.00 ASSUM NAME # 2

198029