

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

NOTE: See instructions on reverse belove in	\$ 100 DA
The assumed business name which the undersolution business is: KATET	the state of the s
2. The true name(s) and business address(es) of business under the assumed business name: Name Bow T. Hoadley 8	f the entity or individual(s) doing TO ST Complete Address RAS Tyhee American Falls, TD 83211
3. The general type of business transacted unde Retail Trade Transportation ar	r the assumed business name is:
Wholesale Trade ☐ Construction Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: KATET ☐ P.D. Box 12 ☐ American Falls, TD 83211 5. Name and address for this acknowledgment	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
COPY is (if other than # 4 above):	
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE ### 17/2004 05:00 CK: 1002 CT: 158010 BH: 733631 1 8 25.80 = 25.00 ASSUM NAME # 2
Printed Name: <u>Bow Hoadley</u> Capacity/Title: Owner	CK: 1002 CT: 158010 BH: 733631 1 0 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title. (/W/(C)	12