



# 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.

**FILED EFFECTIVE**

**08 SEP 22 AM 9:00**

**SECRETARY OF STATE  
STATE OF IDAHO**

1. The assumed business name which the undersigned use(s) in the transaction of business is:

CIRCLE LAZY S FARMS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

DEAN B. SHAW

328 E 400 LANE N, RUEPRT ID 83350

3. The general type of business transacted under the assumed business name is:

- |  |  |
|--|--|
| <input type="checkbox"/> Retail Trade                        | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input type="checkbox"/> Construction                        |
| <input type="checkbox"/> Services                            | <input checked="" type="checkbox"/> Agriculture              |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |  |

4. The name and address to which future correspondence should be addressed:

DEAN B SHAW

328 E 400 LANE N

RUPERT ID 83350

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: X *Dean B Shaw*

(signature required)

Printed Name: DEAN B SHAW

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

g:\corporate\idaho\forms\idaho.p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
09/22/2008 05:00  
CK: 9845947 CT: 158018 BH: 1136932  
1 @ 25.00 = 25.00 ASSUM NAME # 5

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