

CERTIFICATE OF ASSUMED BUSINESS NAME

10 NOV 29 AM 8: 37

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

SECPLEY OF STATE

Please type or print legibly. Instructions are included on back of application.

L A Pa	lacios Partnership
The true name(s) and <u>business</u> address business under the assumed business	s(es) of the entity or individual(s) doing name:
Name	Complete Address
Luis Albada Baladia	213 1/2 S 1st E, Rexburg, ID 83440
Luis Alberto Palacios	213 1/2 S 1st E, Rexburg, ID 83440
Wholesale Trade Constructi	tion and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Est	Submit Certificate of
 The name and address to which future correspondence should be addressed: Luis A Palacios Chavez 213 1/2 S 1st E, Rexburg, ID 83440 	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	nent
gnature:	Secretary of State use only
inted Name: Luis A Palacios Chavez	
apacity/Title: Owner (2)	_
gnature:	- IDAHO SECRETARY OF STATE
inted Name: 498 Alberto Palacios	11/29/2010 05:00 CX: NO CK# CT: 253107 BH: 1248688
pacity/Title: Owner	- 1 2 25.00 = 25.00 ASSUM NAME #

abn.pmd Rev.07/2010

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