

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Experimental Please type or print legibly. Instructions are included on back of apprenticular and provided in the control of	S NAME he undersigned Business Name.
The assumed business name which the unbusiness is: The Clarks The true name(s) and business address(es)	
business under the assumed business nan Name David R Snarr	· · · · · · · · · · · · · · · · · · ·
3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture	
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: David R Snarr 1145 Canyon Ave. Idaho Falls, ID 83402	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	nt ·
77.008	Secretary of State use only
Signature: David R Sparr	
Printed Name: David R Snarr Capacity/Title: Owner	20 10 10 10 10 10 10 10 10 10 10 10 10 10

IDAHO SECRETARY OF STATE

96/19/2013 05:00

CK: 536147 CT: 284447 BH: 1378671
1 2 25.88 = 25.88 ASSUM NAME # 2

D163975

Capacity/Title:

Signature:

Printed Name: