

Signature:\_

Printed Name:

Capacity/Title:

(see instruction #8 on back of form)

## 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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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1. The assumed business name which the undersigned use(s) in the transaction of business is: 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 Vanga, ID, 83686 Inc. 323 5. Provedine 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$20.00 fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: **Basement West** SINCOPSS PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 5. Name and address for this acknowledgment 463-1316 CODV is (if other than # 4 above): Secretary of State use only

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IDAHO SECRETARY OF STATE 01/24/2003 05 200 CX: 6985 CT: 159800 BH: 658616 0 20.00 = 20.00 ASSIM NAME #

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