

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

78日第11日 福 9:25

SECRETALL OF STATE STATE OF IDAMO

Please type or print legibly. NOTE: See instructions on reverse before filing.

	ML Enterprises
The true name(s) and business addre business under the assumed business Name Mike Seeley	ess(es) of the entity or individual(s) doing s name: Complete Address 1735 N Mansfield Way, Eagle, ID 83616
Louise Seeley	1735 N Mansfield Way, Eagle, ID 83616
	ed under the assumed business name is: tation and Public Utilities
Services Agricultu Manufacturing Mining Finance, Insurance, and Real Es	Submit Certificate of Assumed Business
 The name and address to which future correspondence should be addressed: ML Enterprises 	700 West Jefferson Basement West
1735 N Mansfield Way, Eagle, ID 83616	PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowled copy is (if other than # 4 above):	dgment Phone number (optional): 208-639-2857
	Secretary of State use only
nature: Deeleg (eignature regulfed)	Daho Secretary of Sevendon CK: 1212 CT: 158010 BH 1 9 25.00 = 25.00 ASS
nted Name: MIKE SEELEY	
pacity/Title: <u>OWNER</u>	1 9 25.00 = 25.00 AS