



# 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**

04 DEC -7 AM 10:32

SECRETARY OF STATE  
STATE OF IDAHO

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

FREEDOM PROPERTIES

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

RAYMOND V. SWARTZ

7612 COLEHAVEN AVE., BOISE, ID 83704

SUSAN E. SWARTZ

7612 COLEHAVEN AVE., BOISE, ID 83704

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 type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                                  | <input type="checkbox"/> Mining                              |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate |  |

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

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

RAYMOND V. SWARTZ

7612 COLEHAVEN AVE.

BOISE, ID 83704

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

Phone number (optional):

208-376-3018

Secretary of State use only

DS2450

IDAHO SECRETARY OF STATE  
12/07/2004 05:00  
CK: 127103372106KDW CT: 172099 BH: 780204  
1 @ 25.00 = 25.00 ASSUM NAME # 2

Signature: Raymond V. Swartz

(signature required)

Printed Name: RAYMOND V. SWARTZ

Capacity/Title: OWNER

(see instruction # 8 on back of form)