



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.

07 OCT -9 AM 10: 18

SECRETARY OF STATE
STATE OF IDAHO

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

Cascade Equipment

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Kevin J. Radigan

Complete Address

10400 Overland Rd. # 337 Boise, ID 83709

3. The general type of business transacted under the assumed business name is:

<input checked="" 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 type="checkbox"/> Finance, Insurance, and Real Estate	

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

Kevin J. Radigan

10400 Overland Rd. #337

Boise, ID 83709

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

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

Secretary of State use only

Signature: 
(signature required)

Printed Name: Kevin J. Radigan

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 04/2003

IDaho SECRETARY OF STATE
10/09/2007 05:00
CK: 1302729 CT: 172099 BH: 1079547
1 @ 25.00 = 25.00 ASSUM NAME # 2

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