

Capacity/Title: Partner

(see instruction # 3 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned most submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

individual(s) doing lete Address ad Rd. Boise 70 8370 d Rd. Boise 70 8370 business name is: es int Certificate of med Business e and \$25.00 fee to:
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etary of State Vest Jefferson ment West ox 83720 ID 83720-0080 34-2301 number (optional):
(1) 33/3033