

Signature:___

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2015 DEC 10 AM 9: 05

1.	SECRETARY OF STATE ne assumed business name which the undersigned use(s) in the tratisaction or properties is:		
2.	The individual and/or entity the assumed business nam		Idress(es) of those doing business under you listed in #1):
	Aristeo Zamora Bucio	3225 North 2400 East Twin Falls, ID 83301	
	(Name)	(Address)	
3.	The general type of business transacted under the assumed business name is:		
	Retail Trade Wholesale Trade	Construction Agriculture	Transportation and Public UtilitiesMining
	Services		Finance, Insurance, and Real Estate
4.	Mailing address for future correspondence: 5. Name and address for this acknowledgment copy is (if other than #4):		
	Aristeo Zamora Bucio		Aristeo Zamora Bucio
	(Name) 3225 North 2400 East		(Name) 3225 North 2400 East
	(Address)		(Address)
	Twin Falls , ID 83301	State) (Zipcode)	Twin Falls , ID 83301 (City) (State) (Zipcode)
Pri	nted Name: 9 A S 150	ZUMORO	Secretary of State use only
Printed Name: PRISTED ZUMBRU Signature: PRISTED ZUMBRU			10AHO SECRETARY OF STATE 12/10/2015 05:00
Printed Name:			CK:2339% CT:158010 BH:1503643 10 25.00 = 25.00 ASSUM NAME #2
Signature:			
Printed Name:			D183102

Rev. 08/2015