

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

CERTIFICATE OF	FILED EFFECTIVE
ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned	e(s) in the transaction es
submits for filing a certificate of Assumed Business Name.	STATE OF
Please type or print legibly.  NOTE: See instructions on reverse before filing.	Car My
MOTE: See Histituctions on reverse services	Or S. C.
The assumed business name which the undersigned use business is:	
Rhino Sports of the North	ressin
<ol> <li>The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:</li> </ol>	
Name C	omplete Address
JACKIE FISHER 907	9 N Kayusgate
TIM GATES: - HOY	then in ASSO
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Public I	<b>Utilities</b>
<ul><li>☐ Wholesale Trade</li><li>☐ Construction</li><li>☐ Agriculture</li></ul>	Out with Contification of
☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
909 N Ransporte	PO Box 83720 Boise ID 83720-0080
Hayden 10 83850	208 334-2301
	Phone number (optional):
<ol> <li>Name and address for this acknowledgment copy is (if other than #4 above):</li> </ol>	Hollo Harrison (Spanissy).
	Secretary of State use only
Signature Schiller 18	IDAHO SECRETARY OF STATE
Printed Name: JAULE TOUR	CK: NO CK # CT: 226467 BH: 1117349
Capacity/Title: MIMDIR	*
(see instruction # 6 on back of form)	D122221