

## 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.

12 FEB 21 PM 3: 45

## Please type or print legibly. Instructions are included on back of application.

STATE OF IDAHO

The assumed business name which the und business is:  SHELL Miff	
2. The true name(s) and <u>business</u> address(es) business under the assumed business nam  Name  Shorow  Wiese	
3. The general type of business transacted uniform   Retail Trade	der the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	t
Signature: Signature: Greawles Capacity/Title: Owner Signature:	IDAHO SECRETARY OF STATE  102/22/2012 05:00  CK: CASH CT: 158010 BH: 1311575
Printed Name:	EGO DO NOCON NINE # C
Capacity/Title:	1)153475

abn.pmd Rev. 07/2010