

Capacity/Title: OWNER

(see instruction # 8 on back of form)

## 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.

09 FEB 24 AM 8: 23

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

The true name(s) and business addres business under the assumed business		y or individual(s) doing	 
Name		Complete Address	
BILLIE S SMITH	PO L	PO BOX 1925	
	2357 HAY	UMER HAYDEN DEN) 10 83	
The general type of business transacte	d under the ass	umed business name is	3:
Manufacturing Mining		Submit Certificate of	•
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Es The name and address to which future correspondence should be addressed:	r Serv	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	
Finance, Insurance, and Real Es The name and address to which future correspondence should be addressed:  No. IDANO PILOT CA PO BOX 1925	r Serv 35	Assumed Business Name and \$25.00 fee to Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080	<b>):</b>

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