

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2013 OCT 21 PM 1= 26

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

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the under business is: \[\alpha \left(\alpha \left(\alpha \left) \left(\alpha \left) \left(\alpha \left(\alpha \left) \left(\alpha \left(\alpha \left) \left(\alpha \left(\alpha \left) \left(\alpha \left(\alpha \left(\alpha \left) \left(\alpha \left(\alpha \left(\alpha \left) \left(\alpha \left(\alpha \left(\alpha \left(\alpha \left) \left(\alpha \left(\alpha \left(\alpha \left) \left(\alpha \left(\alpha \left(\alpha \left) \left(\alpha \left(\alpha \left) \left(\alpha \left(\alpha \left) \left(\alpha \left(\alpha \left(\alpha \left) \left(\alpha \left(\alpha \left) \left(\alpha \left(\alpha \left) \left(\alpha \le	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Macurina Freeman	• • • • • • • • • • • • • • • • • • • •
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720
Jardun City Id 85114 5. Name and address for this acknowledgment	Boise ID 83720-0080 208 334-2301
COpy is (if other than # 4 above):	
Signature: Mayrine Treeman	Secretary of State use only
Capacity/Title: Ownr	IDAHO SECRETARY OF STATE
Signature: Artoricalis Sercoreau Printed Name:	10/22/2013 05:00 CK: CASH CT: 288816 BH: 1394849 1 2 25.00 = 25.00 ASSUM WAME # 2
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