CERTIFICATE OF ASSUMED BUSINESS NAME

	(Please type or print legibly. See instructions on reverse.)	
	To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name	ED/EF
1.	The assumed business name which the undersigned use(s) in the transaction of business is:	D/EFFECT
2.		NE NE
	Name Complete Address	
,	Jose L. Villarreal 102 Silver Sage Place	-
	Susana Villarceal 102 Solver Sage Place	_
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)	
	☐ Retail Trade ☐ Manufacturing ☐ Transportation and Public Utilitie ☐ Wholesale Trade ☐ Agriculture ☐ Finance, Insurance, and Real Expression ☒ Services ☐ Construction ☐ Mining	
4.	The name and address to which future correspondence should be addressed:	-
	Submit Certificate of Assumed Business Name and \$20.00 fee to:	
	Name and address for this acknowledgment copy is (if other than # 4 above): Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
	Secretary of State use only IDANO SECRETARY OF STATE	
atu	IDAHO SECRETARY OF STATE 10/24/2000 09:00 CK: 1886 CT: 137624 BH: 356461 1 8 20.80 = 28.00 ASSUM NAME # 2	
1	Nome: Tag 1 1111	

Signa Printed Name: Sose 1. Villacreal Capacity:___

(see instruction # 8 on back of form)

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