

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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

2014 MAY 27 AM 4 46

SECRETARY OF STATE OF INAHA

	Billy Knax	
2.	The true name(s) and <u>business</u> address(est business under the assumed business name Name William Knox LLC W138 307	
3.		Submit Certificate of Assumed Business
4.	The name and address to which future correspondence should be addressed: Harry William Knox III 3420 N Knox Dr. King Hill Idaho 83633	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
	Name and address for this acknowledgmer copy is (if other than # 4 above):	nt
		Secretary of State use only
	ture: Key Line	IDIVA SECRETAR ON SMITH
inted Name: Harry William Knox III		1DAHO SECRETARY OF STATE 05/27/2014 05:00
•	city/Title: Owner	CK:NO CK# CT:297300 BH:14263 16 25.00 = 25.00 ASSUM NAME
		IG 20.00 - 20.00 ABBUR MAME
11100	d Name:	

abn.pmd Rev. 07/2010

9/21/2012