

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

ann SEP 29 AM 8: 34

LANGUE IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

business under the assumed business name:	· · ·
Name	Complete Address
haren Harris	317 E Selfice Way
Jeffrey Harris	Post Falls, ID 83854
The general type of business transacted under	
The general type of business transacted under	the assumed business name is:
Retail Trade Transportation an	d Public Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Socratory of State
correspondence should be addressed:	Secretary of State 700 West Jefferson
Bee Z Bakin	Basement West
511 E. Seltice Way	PO Box 83720
Post Falls, TD 83854	Boise ID 83720-0080
(Karen Harris)	208 334-2301
	Dhaman
	Phone number (optional):
Name and address for this acknowledgment copy is (if other than # 4 above);	(509)768-2907

Signature: Marn Harris

Printed Name: Mayor Harris

Capacity/Title: Owner

(see instruction # 8 on back of form)

IDAHO S **Ø9/29** CK: 3392 C 1 & 25.00 =

IDAHO SECRETARY OF STATE
09/29/2003 05:00
CK: 3392 CT: 158010 BH: 703951
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 69256