



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED/EFFECTIVE

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

MAY -1 AM 9:27

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Administrative Support Services

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Complete Address

Tara D. Funk

P.O. Box 167

American Falls, ID. 83211

3. The general type of business transacted under the assumed business name is.
(mark only those that apply)

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☒

Services

☐

Construction

☐

Mining

4. The name and address to which future correspondence should be addressed

Phone number (optional)

(208) 226-2228

P.O. Box 167

American Falls, ID 83211

Submit Certificate of
Assumed Business
Name and \$20.00 fee to

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Secretary of State use only

Signature

Tara D. Funk

Printed Name:

Tara D. Funk

Capacity:

Owner/Operator

(see instruction # 6 on back of form)

IDAHO SECRETARY OF STATE

05/02/2000 09:00
CX: 1001 CT: 130476 BH: 314106

1 @ 20.00 = 20.00 ASSUM NAME # 2

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