Printed Name: nonald

Capacity/Title: Dwner

(see instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME



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

02 JAN 23 AH 8: 27

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

	STATE OF IDAHO
The assumed business name which the undersig business is:	ned use(s) in the transaction of
Tulé Apartments	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Donald M. Blackketter 18 Vicki T. Blackketter 18	e entity or individual(s) doing Complete Address 37 E. (oth Street Anscew, 1) 73743
3. The general type of business transacted under the	
☐ Retail Trade☐ Transportation and F☐ Wholesale Trade☑ Construction	Public Utilities
☐ Services ☐ Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business Name and \$20.00 fee to:
Finance; Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson
Donald M. Blackketter 1×37 E. 6th Street	Basement West PO Box 83720
Moscow 1D 83843	Boise ID 83720-0080
	208 334-2301
5. Name and address for this acknowledgment	Phone number (optional):
COPy is (if other than # 4 above):	(208)882-5256
	Secretary of State use only
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IDAHO SECRETARY OF STATE

91/24/2002 95:00

CK: 8651 CT: 156239 BH: 442865
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