

## CERTIFICATE OF FILED EFFECTIVE ASSUMED BUSINESS NAME JUL 25 PM 4: 36

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business National OF IDAHO

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

Ne	tForAmerica
The true name(s) and <u>business</u> address business under the assumed business in <u>Name</u> Phillip Robinson	s(es) of the entity or individual(s) doing name: <u>Complete Address</u> PO Box 1292, Hayden, ID 83835
. The general type of business transacted	d under the assumed business name is:
Retail Trade Transporta	ation and Public Utilities
<ul> <li>Wholesale Trade ☐ Construct</li> <li>✓ Services ☐ Agricultur</li> </ul>	
<ul><li>Manufacturing</li><li>Mining</li><li>Finance, Insurance, and Real Est</li></ul>	Assumed Business tate Name and \$25.00 fee to:
<ul> <li>The name and address to which future correspondence should be addressed:</li> </ul>	Secretary of State 450 North 4th Street PO Box 83720
Phillip Robinson	Boise ID 83720-0080
PO Box 1292	
Hayden, ID 83835	
5. Name and address for this acknowledge copy is (if other than # 4 above):	gment
	Secretary of State use only
nature: KLAG BO	
nted Name: Phillip Robinson	
pacity/Title: Owner	
nature:	OF OVATE
nted Name:	IDAHO SECRETARY OF STATE  07/25/2011 05:00  CK: 739688 CT: 172099 BH: 1283933 1 8 25.00 = 25.00 ASSUM NAME # 3