

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.

FILED EFFECTIVE

2012 SEP 12 AM 9: 44

SECRETARY OF STATE STATE OF IDAHO

The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name	e entity or individual(s) doing Complete Address
AIFRED JOSEPH ARAGON JR	
4491	S TRAURIDGE AVE
\mathcal{B}_{ℓ}	use, Jd4Ho 83716
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: AL ARAGON	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
4491 STRAILRIDGE AVE	208 334-2301
Bouse Jd 83716 Name and address for this acknowledgment	
COPY is (if other than # 4 above):	

IDAHO SECRETARY OF STATE

@9/12/2012 @5:00

CK: CASH CT: 274181 BH: 1339546
1 0 25.00 = 25.00 ASSUM NAME # 2

D158033

Capacity/Title: OWNER OPERATOR

Signature: _____

Printed Name: __ Capacity/Title: _