



# CERTIFICATE OF ASSUMED BUSINESS NAME

**FILED EFFECTIVE**

07 NOV -7 AM 8:13

**SECRETARY OF STATE  
STATE OF IDAHO**

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

Please type or print legibly.

**NOTE: See Instructions on reverse before filling.**

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

High Desert Mobile Welding & Fabrication

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

Name

Complete Address

FREDERICK M. Greeley II 320 9th Ave East - Gooding ID  
DIANA L. Wiley POBox 493 - Gooding ID

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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

320 9th Ave East -  
Gooding, ID 83330

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

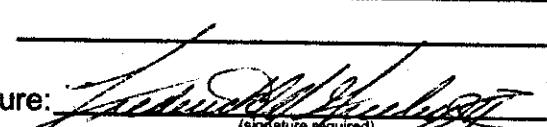
Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

Phone number (optional):

1-208-280-2310

Secretary of State use only

Signature: 

(Signature required)

Printed Name: FREDERICK M. Greeley II

Capacity/Title: PARTNER

(see instruction # 8 on back of form)

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Revised 04/2003

11/07/2007 05:00  
CK: 1001 CT: 158810 BH: 1084268  
1 0 25.00 = 25.00 ASSUM NAME # 2

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