CERTIFICATE OF ASSUMED BUSINESS NAME

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

nits for filing a certificate of Assumed Business Name

Please type or print legibly.

08 DEC 31 AM 8: 49
SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

Swe	et Threads
The true name(s) and business address(e business under the assumed business na Name Melissa Fishburne	
3. The general type of business transacted to Retail Trade ☐ Transportation☐ Wholesale Trade ☐ Construction☐ Services ☐ Agriculture☐ Manufacturing ☐ Mining☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Melissa Fishburne	on and Public Utilities Submit Certificate of Assumed Business
12723 North 11th Avenue Boise, Idaho 83714	(208) 334-2301
5. Name and address for this acknowledgm copy is (if other than # 4 above):	- nent
	Secretary of State use only
gnature: Michburne	- St. 1547 CT: 158818 3H: 11582: 1 8 25.98 = 25.88 ASSUM MARE