

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED FFECTIVE

SECRETARIAN AM 8: 5.

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

Printed Name:

Signature:

Printed Name:

Signature:____

	ame (do <u>not</u> include the name y	dress(es) of those doing business under ou listed in #1):
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g	2011 E Mapp Di 1 00	t Falls, ID 83854
(Name)	(Address)	·
(Name)	(Address)	
(Name)	(Address)	
(Name)	(Address)	
X Retail Trade☐ Wholesale Trade☐ Services	ConstructionAgricultureManufacturing	☐ Transportation and Public Utilities☐ Mining☐ Finance, Insurance, and Real Estate
Mailing address for future	correspondence: 5	. Name and address for this acknowledgmer copy is (if other than # 4):
Abigail Prussack		
(Name) 2041 E Knapp Dr		(Name)
(Address)		(Address)
Post Falls, ID 83854		
(City)	(State) (Zipcode)	(City) (State) (Zipcod
nted Name: Abigail Prussa	_	Secretary of State use only
nature: als Punk		IDAHO SECRETARY OF STATE

1DAHO SECRETARY OF STATE 07/13/2016 05:00

CK:112 CT:158010 BH:1537335 16 25.00 = 25.00 ASSUM NAME #2

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Rev. 08/2015