

Signature:_

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2018 JUN -7 PM 1:53

	Filing fee: \$25.00.	2010 2014 1 LH 1: 23
1	The assumed business name which the undersign	SECRETARY OF STATE "STATE OF IDAHO
••	Total Distress name which the undersign	ned use(s) in the transaction of business is:
	Focal Point Home Dosie	in Center
2.	The individual and/or entity names and business	address(es) of those doing husiness under
	the assumed business name (do not include the name	ne you listed in #1):
	JIM MEADOLLS & 4577	W. Chinden Word. Boise 83714
	(Name) (Address)	/
	(Name) (Address)	
	(Name) (Address)	
	(Name) (Address)	
3. The general type of business transacted under the assumed business name is:		a assumed husiness name is:
		r
	Retail Trade Construction Wholesale Trade Agriculture	 Transportation and Public Utilities Mining
	☐ Services ☐ Manufacturing	
	3	
4	Mailing address for future correspondence:	5 Name and address for this sales of
••	1	 Name and address for this acknowledgment copy is (if other than # 4):
	Jim MEASONS	Jim MEADEUS
	Jim MEADONS (Name) 4577 W. Chindles blod.	Copy is (if other than #4): Jim MEADOWS (Name) 4577 W. Chinden blud (Address) Abuise Id 83714
	(Address)	(Address) A (Mindle b) vd
	1501Se Id 83714	Buse Il 83714
	(City) (State) (Zipcode)	(City) (State) (Zipcode)
	1 MEM &	
Pri	nted Name: Jim MEADOUS	Secretary of State use only
Sig	nature:	
Printed Name:		1DAHO SECRETARY OF STATE 06/07/2018 05:08
		CK:4107 CT:358863 BH:1647689
Sig	nature:	16 25.00 = 25.00 ASSUM NAME #2
Prir	nted Name:	D 203264

Rev. 06/2015