

Signature:

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

## FILED EFFECTIVE

2815 JUL -6 AM 10: 56

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. The assumed business name which the undersign	ned use(s) in the		PY OF STATE Deineabo
Idaho Estate Planning and Elder Law			
The individual and/or entity names and business a the assumed business name (do not include the nam	address(es) of th	ose doing busine	ess under
Idaho Estate Planning, P.C.  (Name)  453 S. Fitness Plaza, Eagle, Idaho 83616 (Address)  Mark E. Wight (Name)	(City)	(State)	(Zipcode)
453 S. Fitness Plaza, Eagle, Idaho 83616	(City)	(State)	(Zipcode)
(Name)	(Oil)	(000)	<u> </u>
(Address)	(City)	(State)	(Zipcode)
. The general type of business transacted under the	e assumed busin	ess name is:	
☐ Retail Trade ☐ Construction   ☐ Wholesale Trade ☐ Agriculture   ☒ Services ☐ Manufacturing	Mini	sportation and Pong ng nce, Insurance, a	
. Mailing address for future correspondence:	5. Name and a copy is (if oth	address for this a er than # 4):	acknowledgment
Mark E. Wight	Mark E. Wight		
453 S. Fitness Plaza	453 S. Fitness	s Plaza	
Eagle ID 83616 (City) (State) (Zipcode)	Eagle (City)		D 83616 ate) (Zipcode)
Printed Name: Mark/E. Wight	Secretary of State use only		
Printed Name: Mark E. Wight, Idaho Estate Planning	IDAHO SECRETARY OF STATE 07/07/2015 05:00 CK:8208 CT:188203 BH:148278: 16 25:00 = 25:00 ASSUM NAME		
Printed Name:			

Rev. 07/2015