

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

11 APR 18 AM 9:09

## Please type or print legibly. Instructions are included on back of application.

Instructions are included on back of	application.  SECF: ARY OF STATE  STATE OF IDAHO
The assumed business name which the business is:	undersigned use(s) in the transaction of
The	e Silver Lining
The true name(s) and <u>business</u> address business under the assumed business in <u>Name</u> Joni or Stephen Schonebaum	
3. The general type of business transacted  Retail Trade Transporta  Wholesale Trade Constructi  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Est	ation and Public Utilities ion e Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed:     Joni Schonebaum (The Silver Lining)     30595 N. Meadow Street     Athol, ID 83801	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than #4 above):	ment
	Secretary of State use only
Signature: Goni R. Schone Vouum	_
Printed Name: <u>Joni K. Schone baum</u>	<u> </u>
Capacity/Title:	
Signature: X Hophen In Monotouwy Printed Name: Stephen Schonebaun	☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

D146967

Capacity/Title: