

Signature:

Printed Name:

Printed Name:

Signature:

Signature:___

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.



1. The assumed business name which the undersigned use(s) in the transaction of the firm of the transaction **Green Springs Ranch** 2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1): Heather Lynn Taylor-Allen 8093 South 4500 W. Victor, Idaho 83455 (Name) (Address) (Name) (Address) (Name) (Address) (Name) (Address) 3. The general type of business transacted under the assumed business name is: Construction Retail Trade Transportation and Public Utilities Wholesale Trade Agriculture Minina Manufacturing Services Finance, Insurance, and Real Estate 4. Mailing address for future correspondence: 5. Name and address for this acknowledgment CODY IS (if other than #4): Heather Taylor-Allen (Name) (Name) 8093 South 4500 West (Address) (Address) Victor, Idaho 83455 (City) (State) (Zipcode) (City) (Zipcode) Printed Name: Heather Taylor-Allen Secretary of State use only

1DAHO SECRETARY OF STATE 02/16/2017 05:00

CK:815 CT:334700 BH:1569263 16 25.00 = 25.00 ASSUM NAME #2

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