

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Signature:

2015 DEC 11. AN O

1. The assumed business name which the undersigned use(s) in the transaction of strainess at the Clockwise Quality Services 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): Kirk A Loftis 224 9th st lewiston ld 83501 (Name) (Address) (Name) (Address) (Name) (Address) 3. The general type of business transacted under the assumed business name is: Retail Trade Construction Mining Molesale Trade Agriculture Mining Services Manufacturing Finance, Insurance, and Real Estate 4. Mailing address for future correspondence: 5. Name and address for this acknowledgment copy is (if other than #4): Kirk A Loftis (Name) (Name)
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): Kirk A Loftis 224 9th st lewiston ld 83501 APT # 7 (Name) (Address) (Name) (Address) (Name) (Address) (Name) (Address) 3. The general type of business transacted under the assumed business name is: Retail Trade Construction Transportation and Public Utilities Wholesale Trade Agriculture Mining Services Manufacturing Finance, Insurance, and Real Estate 4. Mailing address for future correspondence: 5. Name and address for this acknowledgment copy is (if other than #4): Kirk A Loftis (Name)
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Copy is (if other than # 4): Kirk A Loftis (Name)
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Kirk A Loftis (Name) (Name)
(Name)
224 9th st apt #7
(Address) (Address) lewiston ld 83501
(City) (State) (Zipcode) (City) (State) (Zipcode)
Printed Name: Kirk LofT/5 Secretary of State use only
Printed Name: Kirk LofT/5 Secretary of State use only Signature: 12/9/15 IDAHO SECRETARY OF STATE
Brinted Name: 12/14/2015 05:00
CK:23211480047 CT:158010 BH:1504237
Signature: 1@ 25.00 = 25.00 ASSUM NAME #2
Printed Name:

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