



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2015 AUG 10 AM 9:17

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

TRIPLE D PROPERTIES

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):

DURELLA D HOLMES 15107 WESTSIDE LN LEWISTON ID 83501
(Name) (Address) (City) (State) (Zipcode)

DONALD R HOLMES 15107 WESTSIDE LN LEWISTON ID 83501
(Name) (Address) (City) (State) (Zipcode)

(Name) (Address) (City) (State) (Zipcode)

(Name) (Address) (City) (State) (Zipcode)

3. The general type of business transacted under the assumed business name is:

- | | | |
|--|--|---|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Construction | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Services | <input type="checkbox"/> Manufacturing | <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

DURELLA D HOLMES
(Name)
15107 WESTSIDE LN
(Address)
LEWISTON ID 83501
(City) (State) (Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: DURELLA DEE HOLMES

Signature: Durella Dee Holmes

Printed Name: DONALD REED HOLMES

Signature: Donald Reed Holmes

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

08/10/2015 05:00

CK:1438 CT:313323 BH:1487516
10 25.00 = 25.00 ASSUM NAME #2

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