

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

FILED EFFECTIVE

2017 SEP - 1 AM 9: 35

SECRETARY OF STATE STATE OF IDAHO

	Diamond IT 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):					
2.						
	Kevin Riley	4655 Stamm Lane	e, E20	204, Nampa, ID 83687		
	(Name)					
	(Name)	(Address)				<u></u>
	(Name)	(Address)				
	(Name)	(Address)			,	
3.	The general type of business transacted under the assumed business name is:					
	☐ Retail Trade☐ Wholesale Trade☒ Services	Construction Agriculture Manufacturing		Minir	sportation and Publicing ng nce, Insurance, and R	
4.	Mailing address for future	correspondence:	5.	Name and a	address for this ackno er than # 4):	wledgment
	Kevin Riley (Name)			(Name)		
	4655 Stamm Lane, E204			(Hamo)		
	(Address)			(Address)	,	
	Nampa (City)	ID 83687 (State) (Zipcode)		(City)	(State)	(Zipcode)
Printed Name: Kevin Riley				Secretary of State use only		
Sig	gnature:				IDAHO SECRETARY OF	? ያ ጥጴጥ፫
Pr	inted Name:		09/01/2017 05:00			
Si	gnature:		CK:14540676 CT:172099 BH:1600915 16 25.00 = 25.00 ASSUM NAME #2			
Pri	inted Name:				NOITE	
Signature				D196788		