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CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2017 OCT 12 AM 10:00

SECRETARY OF STATE
STATE OF IDAHO

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

Samson Movers

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):

Leonard Barker 2937 Magnolia St Apt 104 Lewiston ID 83501
 (Name) (Address)

Hidie Hamington P.O. Box 09 Uniontown WA 99179
 (Name) (Address)

(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

- Transportation and Public Utilities
- Mining
- Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

2937 Magnolia St Apt 104
 (Name)
Lewiston ID 83501
 (Address)
 (City) (State) (Zipcode)

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

 (Name)

 (Address)
 _____ (City) _____ (State) _____ (Zipcode)

Printed Name: Leonard Barker
 Signature: Leonard Barker
 Printed Name: Hidie Hamington
 Signature: Hidie Hamington
 Printed Name: _____
 Signature: _____

Rev. 09/2015

Secretary of State use only

IDAHO SECRETARY OF STATE
 10/12/2017 05:00
 CR:14917792 CT:172099 BH:1607009
 1@ 25.00 = 25.00 ASSUM NAME #2

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