## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

10 DEC 22 AM 10: 57
HORETARY GLORIAL STATE OF IDAHO

## Please type or print legibly. Instructions are included on back of application.

The assumed business name which the unbusiness is:  H	elicom	
2. The true name(s) and <u>business</u> address(e business under the assumed business na Name  Meda Miller  Mark Brinkoetter  Dolores Ann Brinkoetter  3. The general type of business transacted  Retail Trade  Transportation	Complete Address 3144 2nd St S., Nampa, ID 83686 3144 2nd St S., Nampa, ID 83686 3144 2nd St S., Nampa, ID 83686	
<ul> <li>Wholesale Trade ☐ Constructio</li> <li>✓ Services ☐ Agriculture</li> <li>☐ Manufacturing ☐ Mining</li> <li>☐ Finance, Insurance, and Real Esta</li> <li>4. The name and address to which future correspondence should be addressed:</li> <li>Meda Miller</li> <li>3144 2nd St. S.</li> </ul>	Submit Certificate of Assumed Business	
Nampa, ID 83686  5. Name and address for this acknowledged copy is (if other than # 4 above):	nent  Secretary of State use only	
Signature: Mana Miller  Printed Name: Meda Miller  Capacity/Title: Owner  Signature: Mana Miller  Printed Name: Dolores Ann Brinkoetter  Capacity/Title: Owner		OF STATE Ø5:00 BH: 1252123 ASSUM NAME N

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