## **CERTIFICATE OF** ASSUMED BUSINESS NAME 2015 NOV -2 AM 10: 23

FILED EFFECTIVE

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

Filing fee: \$25.00.

					SIMIL OF ISLAND	
1.	The assumed business name which the undersigned use(s) in the transaction of business is:					
	LITTLE DETAILS CONSULTING					
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):					
	Jodie Christoffersen	3595	3595 Sage RD Homedale ID 83628			
	(Name)	(Addres	<b>(s</b> )			
	(Name)	(Addres	ss)			
	(Name)	(Addres	\$\$)		<del> </del>	
	(Name)	(Addres	35)			
3.	The general type of business transacted under the assumed business name is:					
	<ul><li>☐ Retail Trade</li><li>☐ Wholesale Trade</li><li>☒ Services</li></ul>		Construction Agriculture Manufacturing	g	<ul><li>☐ Transportation and Public Utilities</li><li>☐ Mining</li><li>☐ Finance, Insurance, and Real Estate</li></ul>	
4.	Mailing address for future	oorrespo	indence:	5.	Name and address for this acknowledgment copy is (if other than #4):	
	Little Details Consulting					
	(Name) 3595 Sage Rd				(Name)	
	(Address)				(Address)	
	Homedale (City)	(State)	83628 (Zipcode)		(City) (State) (Zipcode)	
	(City)	(mate)	(z.ipcode)		(City) (State) (Zipcode)	
Printed Name: Jodie Christoffersen					Secretary of State use only	
Sig	gnature: Chshel	<u> </u>	<del></del>			
Printed Name:					IDAHO SECRETARY OF STATE 11/02/2015 05:00	
					CK:1266 CT:262029 BH:1498727	
Signature:					16 25.00 = 25.00 ASSUM NAME #2	
Pri	nted Name:		<u></u>			
Signature:					D182423	

Rev. 08/2015