## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

2018 JUN 18 AM 10: 17

FILED EFFECTIVE

Filing fee: \$25.00.

Printed Name:

Signature:

SECRETARY OF CTAT

1.	The assumed business name which the undersigned use(s) in the transaction of business is:  North Idaho Taping Solutions		
2.	The individual and/or entithe assumed business na	•	address(es) of those doing business under e you listed in #1):
	Gary Munson	3594 N Cedarblom Apt 302 Coeur d Alene ID 83815	
	(Name)	(Address)	
3.	The general type of busin  Retail Trade  Wholesale Trade  Services	ess transacted under the  Construction Agriculture Manufacturing	e assumed business name is:  Transportation and Public Utilities  Mining Finance, Insurance, and Real Estate
4.	Mailing address for future correspondence:  5. Name and address for this acknowledgment copy is (if other than # 4):		
	Gary Munson		
	(Name) (Name) 3594 N Cedarblom Apt 302		(Name)
	(Address) (Add		(Address)
	Coeur d Alene ID 83815		
	(City)	(State) (Zipcode)	(City) (State) (Zipcode)
Pri	nted Name: Gary Munson		Secretary of State use only
Sig	gnature: Gary Mun	(n)	
Pr	inted Name:		1DAHO SECRETARY OF STATE 06/19/2018 05:00
Signature:			CK:1065 $CT:158010$ $BH:164964216.25.00 = 25.00$ ASSIM NAME #2

Rev. 08/2015

10 25.00 = 25.00 ASSUM NAME #2