



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

**FILED EFFECTIVE**

**2018 AUG 27 10:00 AM**

**SECRETARY OF STATE**

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

North Idaho Taxidermy

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):

Steve Cogburn 380 Natures Way Sandpoint, Idaho 83864

(Name)

(Address)

Margaret Cogburn 380 Natures Way Sandpoint, Idaho 83864

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

3. The general type of business transacted under the assumed business name is:

☐ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Steve Cogburn

(Name)

380 Natures Way

(Address)

Sandpoint

(City)

Idaho

(State)

83864

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Steve Cogburn

Signature: [Signature]

Printed Name: Margaret Cogburn

Signature: [Signature]

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

08/28/2018 05:00

CK:4198 CT:362567 BH:1661003

1@ 25.00 = 25.00 ASSUM NAME #2

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