



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

2018 AUG 27 AM 09:35

SECRETARY OF STATE

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Construction	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Mining
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Steve Cogburn

(Name)

380 Natures Way

(Address)

Sandpoint

Idaho

83864

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Steve Cogburn

Signature:

Printed Name: Margaret Cogburn

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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