

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFE

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

02 JAN 31 AN 9: 07

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

STATE OF IDAHO

	STATE OF IDAHO
1. The assumed business name which the u	undersigned use(s) in the transaction of
business is:	
ANDREW CONSults.co	$9\eta$
2. The true name (a) and business address (a	as) of the entity or individual(s) doing
<ol><li>The true name(s) and <u>business</u> address(e business under the assumed business named</li></ol>	me:
Name	Complete Address
Andrew Welch	766 I Street Idaho FAUS_TD 85/2
3. The general type of business transacted t	under the assumed business name is:
Retail Trade Transportation	ion and Public Utilities
☐ Wholesale Trade ☐ Construction	
	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estat	te Name and \$20.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
766 I Street	Basement West PO Box 83720
	Boise ID 83720-0080
Idaho FACIS ID	- 208 334-2301
<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>	_
<ol> <li>Name and address for this acknowledge</li> </ol>	ment Phone number (optional):
COPY IS (if other than # 4 above):	<u> </u>
	Secretary of State use only
	- 18 D 5/60c/
Signature: Andrew Welch	ndelse 10
4.4 (.2.1.1	- Sodrugerswood understand the secretary of state  IDAHO SECRETARY OF STATE  91/31/2002 05:00  CK: 678659257 CT: 156613 BH: 443404  1 8 20.00 = 20.00 ASSUM NAME # 2
Printed Name: Andrew Welch	O1/31/2002 05:00 CK: 678659257 CT: 156613 BH: 443404
Canacity: Outline	1 8 20.00 = 20.00 ASSUN NAME # 2