

Signature:

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

## **FILED EFFECTIVE**

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

2015 AUG 19 AM 8: 35

	Filing fee: \$25.00		SECONTABLY (	ነር ለዋልዋ	E
1.	The assumed business nam	e which the undersigned	SECRETARY ( d use(s) in the transa <b>ction</b> of the	SWES	is: 
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):				
	Lynette Kaye Williams	902 Alpine Street	McCall	ID	83638
	(Name)	(Address)	(City)	(State)	(Zipcode)
	(Name)	(Address)	(City)	(State)	(Zipcode)
	(Name)	(Address)	(City)	(State)	(Zipcode)
	(Name)	(Address)	(City)	(State)	(Zipcode)
Ly (Na	,	·	Finance, Insurance, and State of this accopy is (if other than #4):		
	O Box 2128	<u> </u>	Address)		
<b>√</b> Ci	1cCall IE		(Čity) (Sta	te)	(Zipcode)
Printed Name: Lynette Kaye Williams			Secretary of State use only		
Signature: Tratto Doys Williams			IDAHO SECRETARY OF STATE		
Printed Name:			08/19/2015 05:00 CK:1010 CT:313637 BH:1488738		
Si	gnature:	}	1@ 25.00 = 25.00 2	LSSUM	NAME #2
Printed Name:			D180914		
Sid	anature:				