



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

RESET FORM

2018 AUG -6 AM 9:37

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

My Minerals

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):

Kristen Graves 522 Airway Dr. Lewiston, ID 83501
(Name) (Address)
Michaela Langley 1525 Villiee Dr Modesto, CA 95355
(Name) (Address)

(Name) (Address)

(Name) (Address)

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

- | | | |
|--|--|--|
| <input checked="" 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 type="checkbox"/> Services | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

Kristen Graves
(Name)
522 Airway Dr.
(Address)
Lewiston ID 83501
(City) (State) (Zipcode)

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

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: Kristen Graves

Signature: K. A.

Printed Name: Michaela Langley

Signature: M. A.

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

08/06/2018 05:00

CK:321 CT:361427 BH:1657211
1@ 25.00 = 25.00 ASSUM NAME #2

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