## CERTIFICATE OF ASSUMED BUSINESS NAME

2015 SEP 10 AM 8: 38

**FILED EFFECTIVE** 

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

Filing fee: \$25.00.

SECRETARY OF STATE

1. The assumed business name which	the undersigned use(s) in the	e transaction of business	Pato —
2. The individual and/or entity names the assumed business name (do no Diana Juhnson 3 (Name) (Address	*	_	
(Name) (Addres			
(Name) (Addres			
(Name) (Addres			<u> </u>
3. The general type of business trans	cted under the assumed busi	ness name is:	
Wholesale Trade	griculture	nsportation and Public Uning ance, Insurance, and Re	
4. Mailing address for future correspo	copy is (if ot	address for this acknow	/ledgment
Meridian Til 836	(Address)  (Zipcode) (City)	(State)	(Zipcode)
			(Zipcode)
Printed Name John	<u>/^</u>	Secretary of State use only	
Signature: Printed Name:		1DAHO SECRETARY OF 8 09/10/2015 05	:00
Signature:	l .	C:217 CT:314423 BH: 25.00 = 25.00 ASSU	
Printed Name:			
Signature		D181361	

Rev. 08/2015