

Signature:_____

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED SEFECTIVE

1.	SECRETARY OF STATE The assumed business name which the undersigned use(s) in the transaction of business is: Assisting Legal Services							
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):							
	Kymberly Wescott	14	458 N. Vintag	je Way, N	y, Nampa, ID 83651			
	(Name)	(Addr	(Address)					
	(Name)	(Addı	ess)	<u> </u>				
	(Name)	(Address)						
	(Name)	(Address)						
3.	The general type of bu Retail Trade Wholesale Trade Services	siness tran	sacted under Constructio Agriculture Manufacturi	n	☐ Transp	ortation and Public U		
4.	Mailing address for future correspondence: 5. Name and address for this acknowledgment copy is (if other than #4):						vledgment	
	Assisting Legal Services				Same			
	(Name) 14458 N. Vintage Way				lame)			
	(Address) Nampa,	ID	83651	(Ā	Address)			
	(City)	(State)	(Zipcode)	77	City)	(State)	(Zipcode)	
Printed Name: Kymberly D. Wescott					Secretary of State use only			
Signature: Sembuly Titlesoff					IDAHO SECRETARY OF STATE			
Printed Name:					05/22/2018 05:00 CK:18755914 CT:172099 BH:1645101 16 25:00 = 25:00 ASSUM NAME #2			
Signature:					⊥હ ∠ છ.ί	00 — 20.00 A550M	DAME #2	
Printed Name:					Da	2892		

Rev. 08/2015