

Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

2016 SEP -1 AM 9: 57

1.	SECRETARY OF STATE The assumed business name which the undersigned use(s) in the transaction three was to state of the sta							
	JULIES BOOKKEEPING	J OEKV	ICE					
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):							
	JULIE M SCHWANZ PO BOX 605, S				ES, ID 8386	1		
	(Name)	(Add	(Address)					
	(Name)	(Address)				مغاينت فيبنانان والقيود الموزة في بالمقر بعديا بالمقيد المهرون والتعالي والتعاري والتعاري والتعاري	and the second seco	
	(Name)					uzaneran di denampa di ndajan kungan ndajan mengan di kalin di ina delaksi di ina delaksi di ina delaksi di in	nederate a black prints place apparague apraire.	
	(Name)	(Add	lress)				antiferration for the state of	
3.	The general type of business transacted under the assumed business name is:							
	☐ Retail Trade ☐ Construction ☐ Wholesale Trade ☐ Agriculture ☐ Manufacturing				Minir	•		
	⊠ Services		Manufactur	nng	∐ Finar	nce, Insurance, and	Real Estate	
4.	Mailing address for future correspondence: 5. Name and address for this acknowledgment copy is (if other than # 4):							
	JULIES BOOKKEEPING SERVICE				/N			
	(Name) PO BOX 605				(Name)			
	(Address) ST MARIES	ID	83861		(Address)			
	(City)	(State)	(Zipcode)		(City)	(State)	(Zipcode)	
Pri	Printed Name: JULIE M SCHWANZ					Secretary of State use only	· · · · · · · · · · · · · · · · · · ·	
Signature: July M Solutions						DAHO SECRETARY OF		
Pr	Printed Name				CK: 417	09/01/2016 05 0716 CT:172099 1 00 = 25.00 ASSU	3H:1544442	
Si	Signature:						are a state of the	
Pri	Printed Name:					D188913		

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