



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2017 DEC 26 AM 9:55

SECRETARY OF STATE
STATE OF IDAHO

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

Lines and Times

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):

WMD SOLUTIONS, LLC PO BOX 595 ASHTON, ID 83420

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

☒ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☐ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Jacob Amen

(Name)

PO Box 595

(Address)

Ashton, Idaho 83420

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Jacob Amen

Signature: *Jacob Amen*

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

12/26/2017 05:00

CK:3908 CT:350197 BH:1618054
18 25.00 = 25.00 ASSUM NAME #2

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