

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filina fee: \$25.00.

2015 SEP 18 AM 8: 36

	Filing fee: \$2:		SECRETARY OF STATE				
1.	The assumed business n	ame which the unders	igned use(s) in th		sines	is:	
	Chiomusk (2pal & Gens	<u> </u>				
2.	The individual and/or entity names and business address(es) of those doing business under						
	the assumed business n	ame (do <u>not</u> include the n	ame you listed in #1):			
	Hlvin O. Hensle	4 1325 Hoof	yes #78	Idehofells	$ \int_{(State)}$	834D4	
	Lisa L. Schulh	Puser 1325 F	hopes #78	Ideho falls	10	83404	
	(ivarrie)	(Address)		(City)	(State)	(Zipcode)	
	(Name)	(Address)		(City)	(State)	(Zipcode)	
	(Name)	(Address)		(Číty)	(State)	(Zipcode)	
~	Th						
3.	The general type of business transacted under the assumed business name is:						
	Retail Trade Wholesale Trade	Construction Agriculture	=	nsportation and Pเ ning	ublic Util	ities	
	Services Manufacturing Finance, Insurance, and Real Estate						
4.	Mailing address for future	e correspondence:	5. Name and	d address for this a	cknowle	dgment	
۸ ۱			copy is (if a	other than # 4).			
H (Nar	lvin U. Hensley		(Name)				
13	325 Hoopes # 7	8					
1/40	leho fells 10	83404	(Address)				
(Cil		(State) (Zipcode)	(City)	(Sta	ate)	(Zipcode)	
Printed Name: Alvin D. Hensley Signature: Penn Themera				Secretary of State use only			
Sig	inature: Plian The	inly					
Printed Name: Lisa. L. Schulbauser				1DANO SECRETARY OF STATE 09/18/2015 05:00			
Signature: Jisa Mullhausen				CK:239282 CT:314732 BH:1492821 18 25.00 = 25.00 ASSUM NAME #2			
Pri	nted Name:	- — : 					
Signature:				118151	1.5		
٠, ⁹	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Rev 06/2015		010139	> ブ		