

Signature:

## CERTIFICATE OF **ASSUMED BUSINESS NAME**

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

2015 AUG -5 AM 8: 46

FILED EFFECTIVE

SECRETARY OF STATE Filing fee: \$25.00.

STATE OF IDATIO							
1.	The assumed business name which the undersigned use(s) in the transaction of business is:						
	Astute Accounting						<del></del>
2	The individual and/or entity names and business address(es) of those doing business under						
	the assumed business name (do <u>not</u> include the name you listed in #1):						
	Robin Buckallew	•	_ 0 S Vista A	Boise	ID	83705	
	(Name)	(Addre	,	(City)	(State)	(Zipcode)	
	Buckatlew & Association, PUL 1800 S			Vista Auc	9754		85705
	(Name) (W142133)	(Addre	ss)		(City)	(State)	(Zipcode)
	(Name)	(Address)			(City)	(State)	(Zipcode)
	(Name)	(Addre	ss)		(City)	(State)	(Zipcode)
3. The general type of business transacted under the assumed business name is:							
٥.		_			-1-		
	Retail Trade Construction			<u> </u>	ransportation and	d Public Util	ities
	Wholesale Trade	片	Agriculture	<del>==</del>	Mining 		<b>.</b>
			Manufacturii	ng ∐ ⊦	inance, Insuranc	e, and Real	Estate
4. Mailing address for future correspondence: 5. Name and address for this acl							edament
				CODY IS (if other than # 4):			
R	obin Buckallew				,		
(Nai		<del></del>		(Name)			<del></del>
18	320 S Vista Ave						
	dress)	LID.	22705	(Address)			
(C)	oise	(State)	83705 (Zipcode)	(City)		(State)	(Zipcode)
(0)	ny)	(Glate)	(Zipcode)	(City)		(State)	(zipcode)
Dei	inted Name: Oaks . 5	2 000	1		Secretary of State		
Printed Name: Robin Buccallow				į	Secretary or State	r use only	
Signature: Signature:					TRIBA GEARN	82 NV /\b GMI	m e
Printed Name:				1DAHO SECRETARY OF STATE 08/05/2015 05:00			
Signature:				<u> </u>	CK:147 CT:301072 BH:1486715 10 25.00 = 25.00 ASSUM NAME #2		
Pri	inted Name:				_		
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Rev. 06/2015

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