## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See Instructions on reverse before filing.

(see instruction # 8 on back of form)

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SECRETARY OF STATE STATE OF IDAHO

2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Name  Pennifer ke Hexander 3005	Complete Address
Retail Trade Transportation and Po	
<ul><li>☐ Services</li><li>☐ Manufacturing</li><li>☐ Mining</li><li>☐ Finance, Insurance, and Real Estate</li></ul>	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:  3003 Hoodoo Loop Rd  Oldtown TD 83822	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
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5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
——————————————————————————————————————	Phone number (optional):

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