

Signature:____

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE 2017 AUG 31 AM 8: 46

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

Filing fee: \$25.00.

SECRETARY OF STATE

Filing ree. \$25.00	J.		SECRETARY OF STATE OF ID	STATE AHO	
1. The assumed business nam	e which the undersign	ed use(s) in the tra	ansaction of business	s is:	
DwyHee Til:	ź				
The individual and/or entity in the assumed business name.		* *	e doing business und	der	
THOMAS D Smithelman	(Address) Huy 9	5 MARSING	<u> 12 83639</u>		
(Name)	(Address)				
(Name)	(Address)				
(Name)	(Address)				
3. The general type of busines Retail Trade Wholesale Trade Services 4. Mailing address for future continues Thomas Demitted (Name) 7970 Huly 95 MALSING TO	Construction Agriculture Manufacturing orrespondence:	☐ Transpo ☐ Mining ☐ Finance	ortation and Public U e, Insurance, and Re dress for this acknow	al Estate	
Printed Name: Thomas D. Smithelman Signature: Printed Name: Signature:		Secretary of State use only IDAHO SECRETARY OF STATE 08/31/2017 05:00 CK:CASH CT:158010 BH:1600890 16 25:00 = 25:00 ASSUM NAME #2			
Printed Name:			01916777		

Rev. 08/2015