

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

2017 APR 21 AM 10: 09

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned use(s) in the transaction of business is:  The Eskridge Family Living Trust		
_			
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):		
		3938 East Shady Glen Ct., Boise, ID 83706	
	(Name) Co-Trustee	(Address)	
	(Mana)	(Address)	
	Debra Otterstein, CoTrstee	, ,	len Ct., Boise, ID 83706
	(Name)	(Address)	
	(Name)	(Address)	
			4
3.	The general type of business transacted under the assumed business name is:		
	Retail Trade	Construction	
	Wholesale Trade	Agriculture	
	Services	Manufacturing	
	Services	Ivianulacioning	⊠ Finance, Insurance, and Real Estate
4.	Mailing address for future con	respondence:	5. Name and address for this acknowledgment
			COPY IS (if other than # 4):
	Eskridge Family Living Trust	t	
	(Name)		(Name)
	3938 East Shady Glen Ct., (Address)	30ISE, 1D 83706	(Advan)
	(Address)		(Address)
	(City) (Sta	te) (Zipcode)	(City) (State) (Zipcode)
Pri	inted Name: /by/-David J Stec	her, Att. at Law	Secretary of State use only
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Sig	gnature: Elawer !	Steely	
Printed Name:			IDAHO SECRETARY OF STATE
Tinned Hame.			04/21/2017 05:00
Signature:			CK:1681 CT:107050 BH:158031 16 25.00 = 25.00 ASSUM NAME
Pri	inted Name:		A COLUMN TO THE STATE OF THE ST
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Sid	anature:		1) 193883

Rev. 08/2015