

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

## FILED EFFECTIVE

2018 MAY -2 AM 11:41

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned use(s) in the transaction of business is:  SPL Venture						
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):						
	SPL Consulting Firm LLC	3040 N. Wolverine Ave. Meridian, ID 83646					
	(Name) (W 15/598)	(Address)				<del></del>	
	(Name)	(Address)				<del></del>	
	(Name)	(Address)				<del></del> _	
	(Name)	(Address)					
3.	The general type of business transacted under the assumed business name is:						
	Retail Trade Wholesale Trade	Construction Agriculture		Mining	and Public Ut		
	⊠ Services	Manufacturing		Finance, insui	rance, and Rea	ai Estate	
4.	Mailing address for future correspondence:		5.	5. Name and address for this acknowledgment copy is (if other than #4):			
	Matt Klinger						
	(Name) 3040 N. Wolverine Ave.			(Name)			
	(Address) Meridian , ID 83646			(Address)	<del></del>	· · · · · · · · · · · · · · · · · · ·	
	(City) (Sta	ate) (Zipcode)		(City)	(State)	(Zipcode)	
Printed Name: Matt Klinger				Secretary of State use only			
Się	gnature: ////////////////////////////////////			*****			
Printed Name:				1DAHO SECRETARY OF STATE 05/02/2018 05:00			
Signature:				CK:18010412 CT:172099 BH:1641528 16 25:00 = 25:00 ASSUM NAME #3			
Printed Name:				D	2026	ටි 8	
Sig	gnature:						

Rev. 08/2015