CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: $25.00.

FILED EFFECTIVE

2016 MAR 28 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:
   Brooks Consulting

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):

(Name)	(Address)
Mellowdee J. Brooks	PO Box 1863, Lewiston, Idaho 83843

3. The general type of business transacted under the assumed business name is:

- [ ] Retail Trade
- [ ] Wholesale Trade
- [x] Services
- [ ] Construction
- [ ] Agriculture
- [ ] Manufacturing
- [ ] Transportation and Public Utilities
- [ ] Mining
- [ ] Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Mellowdee J. Brooks
(Name)
PO Box 1863
(Address)
Lewiston ID 83501
(City) (State) (Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

(Name)
(Address)
(City) (State) (Zipcode)

Printed Name: Mellowdee J. Brooks

Signature: Mellowdee J. Brooks

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
03/29/2016 05:00
CK:3348 CT:322450 BH:1520903
1@ 25.00 = 25.00 ASSUM NAME #2

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