

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE
11 MAY 27 AM 9: 36

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

SECF. MAY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1.	The assumed business name which the under business is:	dersigned use(s) in the transaction of	
2.	The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Edyla Likasik		
3.	The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:	
4.	The name and address to which future correspondence should be addressed: Edyta Likasik 24349 Shery In Callyzell TTV 83607	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	nt	
Signa Printe	ed Name: Edyca Likasik	Secretary of State use only	
	city/Title: Owner		
Signa		IDAHO SECRETARY OF STATE 05/27/2011 05:0	20
_	ed Name: Edyta Likasik	05/27/2011 05:0 CK: 1175 CT: 152320 BH: 1275 1 0 25.00 = 25.00 ASSUM MAN	

D147930