

227



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.
Filing fee: \$25.00.

FILED EFFECTIVE

2016 NOV 18 AM 11:36

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:
Flathead Insurance Services

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):

Flathead Insurance Company 450 W State St. Ste 215 Eagle, ID. 83616

(Name)

(Address)

LLC

W1735310

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

☐ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☐ Services

☐ Manufacturing

☒ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Pacific Crest Services, Inc

(Name)

450 W State St Ste 215

(Address)

Eagle, ID 83616

(City)

(State)

(Zipcode)

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

Charles Webb

(Name)

450 W State St Ste 215

(Address)

Eagle, ID 83616

(City)

(State)

(Zipcode)

Printed Name: Charles Webb

Signature: [Signature]

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

11/18/2016 05:00

CK:4365264 CT:172099 BH:1556016

1@ 25.00 = 25.00 ASSUM NAME #2

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