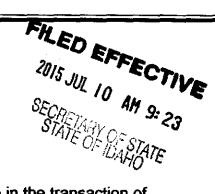


Capacity/Title: Owner

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

## Please type or print legibly. Instructions are included on back of application.



Catydid Creations	
2. The true name(s) and <u>business</u> address under the assumed business	ress(es) of the entity or individual(s) doing ss name:
<u>Name</u>	Complete Address
Caitlin Clark	3505 13th St. #1
Hunter Clark	Lewiston, ID 83501
Retail Trade Transport Transport Transport Trade Construction Trade Construction Trade Trade Construction Trade Trade Construction Trade T	Submit Certificate of Assumed Business Estate Name and \$25.00 fee to:  Secretary of State
3505 13th St. #1	Boise ID 83720-0080 —— 208 334-2301
Lewiston, ID 83501	
5. Name and address for this acknowle copy is (if other than # 4 above):  N/A	
matura ( ) C Olav	
	10AHO SECRETARY OF STATE 97/18/2015 05:00
— — — — — — — — — — — — — — — — — — —	CK:1204 CT:312258 BH:148334
gnature: Quark inted Name: Caikin Clark apacity/Title: Owner	07/10/2015 05:0
nature: 210190	
nted Name: Hunter Clark	<u> </u>