

Signature:\_\_\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

## FILED EFFECTIVE 2818 JUN 15 AM 8: 21

SECRETARY OF STATE
STATE OF IDAHO

1.	he assumed business name which the undersigned use(s) in the transaction of business is:				
	WHOLESALE OUTLET	WHOLESALE OUTLET			
				<del></del>	
2.	The individual and/or entity names and business address(es) of those doing business under				
	the assumed business name (do <u>not</u> include the name you listed in #1):				
	PS HOŁDING LLC	215 N 9TH AVENUE POCATELLO ID 83201			
	(Name) (W195846)	(Address)			
	(Name)	(Address)			
	(Name)	(Address)		<del></del>	
	(Name)	(Address)			
	••				
3. The general type of business transacted under the assumed business name is:					
	Retail Trade	Construction	Transportation and Public Utilit	ies	
	🔀 Wholesale Trade	Agriculture	Mining Mining		
	Services	Manufacturing	Finance, Insurance, and Real (	Estate	
,	. Mailing address for future correspondence: 5		E. Nome and address for this asknowless	lamont	
4.			<ol><li>Name and address for this acknowled copy is (if other than # 4):</li></ol>	gment	
	WILLOU ESALE OLITHET		copy is (if differ man * 4).		
	WHOLESALE OUTLET		(Name)		
	215 N 9TH AVENUE		( ame		
	(Address)	<del></del>	(Address)		
	POCATELLO ID 83201				
	(City) (St	ate) (Zipcode)	(City) (State)	(Zipcode)	
Printed Name: PAXTON LIKNESS			Secretary of State use only		
Sig	inature: There Land	485			
Printed Name:			10AHO SECRETARY OF STATE 06/15/2018 05:00		
<del></del>			CK:1623 CT:230778 BH:		
210	gnature:		1@ 25.00 = 25.00 ASSUM		
Pri	nted Name:		10000000		
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Rev. 08/2015