CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned



gives notice of adoption of an Assumed Business Name.	
1. The assumed business name which the undersigned use(s) in the transaction of	
business is:	ndut Invistigation
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Sherri Name Momson 751 School VR	
J	dallo Falls, ID
	834D)
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	☐ Transportation and Public Utilities ☐ Finance, Insurance, and Real Estate ☐ Mining
4. The name and address to which future Phage correspondence should be addressed:	none number (optional): 208-53-9073
Shorri Inomson	
2151610	Submit Certificate of Assumed Business
5 Julis Drive	Name and \$20.00 fee to:
T = +1 82101	
1.1.000	Secretary of State
5. Name and address for this acknowledgment	700 West Jefferson Basement West
CODY IS (if other than # 4 above):	PO Box 83720
	Boise ID 83720-0080
	208 334-2301
$\overline{\alpha}$	Secretary of State use only
MI I	l 1-

Signature:

Printed Name:

Capacity:

(see instruction # 8 on back of form)

nomson

IDAHO SECRETARY OF STATE
11/28/2001 05:00
CK: 2697 CT: 154023 BH: 431685
1 0 26.00 = 26.00 ASSUM NAME # 2

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