



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2018 FEB -6 AM 9:10

SECRETARY OF STATE
STATE OF IDAHO

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

AJ'S CUSTOM UPHOLSTERY

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):

AARON JOSEPH HENTRUP 1829 DORIAN DR. TWIN FALLS
(Name) (Address)
IDAHO 83301

(Name) (Address)

(Name) (Address)

(Name) (Address)

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

- | | | |
|--|---|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Construction | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Services | <input checked="" type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

AARON HENTRUP
(Name)
1829 DORIAN DR.
(Address)
TWIN FALLS ID 83301
(City) (State) (Zipcode)

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

(Name)
(Address)
(City) (State) (Zipcode)

Printed Name: AARON HENTRUP

Signature: [Signature]

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

02/06/2018 05:00

CK:1165 CT:158010 BH:1625394
10 25.00 = 25.00 ASSUM NAME #2

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