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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.
NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

LeAnn's Bookkeepi	ng and Tax i	Preparation
The true name(s) and business address(es business under the assumed business name Name LeAnn J. Trautman	ne:	ntity or individual(s) doing Complete Address D. Box 263, Winchester, ID 83555
The general type of business transacted ur	nder the as	ssumed business name is:
Retail Trade ☐ Transportation Wholesale Trade ☐ Construction Services ☐ Agriculture Manufacturing ☐ Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: LeAnn's Bookkeeping and Tax Preparation P.O. Box 263 Winchester, ID 83555-0263 Name and address for this acknowledgme copy is (if other than #4 above):		Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
ed Name:	g-kcorpHorms.luion foortgelabri.p06	IDAHO SECRETARY OF ST 12/18/2067 05 CK: 1386318 CT: 172099 BH 1 25.80 = 25.88 ASSUM