



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2016 MAY -6 AM 9:04

SECRETARY OF STATE
STATE OF IDAHO

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

Pend Oreille Insurance

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):

Talpac Inc (C181724) 476394 Hwy 95 North #101 Ponderay, Id 83852

(Name) (Address)

Stefanie Nostdahl 634 Syringa Heights Rd Sandpoint, Id 83864

(Name) (Address)

Jodie Corless 2500 Selle Road Sandpoint, Id 83864

(Name) (Address)

Brian Corless 2500 Selle Road Sandpoint, Id 83864

(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 type="checkbox"/> Manufacturing | <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

Pend Oreille Insurance

(Name)

476394 Hwy 95 #101

(Address)

Ponderay Id 83852

(City) (State) (Zipcode)

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

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: Jodie Corless

Signature: Jodie Corless

Printed Name: Stefanie Nostdahl

Signature: Stefanie Nostdahl

Printed Name: Brian Corless

Signature: Brian Corless

Secretary of State use only

IDAHO SECRETARY OF STATE

05/06/2016 05:00

CK:2131 CT:241041 BH:1527342

1@ 25.00 = 25.00 ASSUM NAME #2

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