



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2014 JUL 28 AM 9:47

Please type or print legibly.

Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

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

Intune Idaho

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Collin Miller

355 S. 11th Ave., Pocatello, ID 83201

Amity Miller

355 S. 11th Ave., Pocatello, ID 83201

Melinda Peterson

355 S. 11th Ave., Pocatello, ID 83201

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

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

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Melinda Peterson

355 S. 11th Ave.

Pocatello, ID 83201

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

Secretary of State use only

IDAHO SECRETARY OF STATE
07/28/2014 05:00

CK:910 CT:137427 BH:1434980
1@ 25.00 = 25.00 ASSUM NAME #2

D 172817

Signature: Melinda Peterson

Printed Name: Melinda Peterson

Capacity/Title: Agent

Signature: Collin Miller

Printed Name: Collin Miller

Capacity/Title: Agent