



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2017 DEC 28 AM 8:45

SECRETARY OF STATE
STATE OF IDAHO

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

HAVE SNOW WILL PLOW

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):

Joe BARNA 415 S. Forest Glen Blvd, Post Falls, ID 83854
(Name) (Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

☐ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Joe BARNA

(Name)

415 S. Forest Glen Blvd.

(Address)

Post Falls ID 83854

(City)

(State)

(Zipcode)

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

Same

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Joe Barna

Signature: [Signature]

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

12/28/2017 05:00

CK:1211 CT:350292 BH:1618358
1@ 25.00 = 25.00 ASSUM NAME #2

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