

CERTIFICATE OF ASSUMED BUSINESS NAME

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

The Waho School of art	
2. The true name(s) and business address(es) of the elements business under the assumed business name:	entity or individual(s) doing
Name	Complete Address
Mend Inc. 70	1 E 44 5 #11
(C179081) C	pardon City 10
	33714
3. The general type of business transacted under the a Retail Trade Transportation and Put Wholesale Trade Construction	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: The lake Select at a Craft	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
701 E. 44 \$ \$ #11 Garden City, 1D 83714	(208) 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
gnature:	
rinted Name: Mich olle Kolley	IDAHO SECRETORY OF GRAVE
apacity/Title: Executive Divector	95/95/2019 95 STATE

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