

Signature:\_\_\_\_

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

CERTIFICATE OF ASSUMED BUSINESS N Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.	NAME  SECRETARY OF SERVICES OF
1. The assumed business name which the undersign Calls Colorsic Ca Binet	ied use(s) in the transaction of businessysty
2. The individual and/or entity names and business at the assumed business name (do not include the name CARL Egbart POBOX 4 (Name)  (Name) (Address)  (Name) (Address)	
3. The general type of business transacted under the  Retail Trade Construction Mholesale Trade Services Manufacturing	assumed business name is:  Transportation and Public Utilities  Mining Finance, Insurance, and Real Estate
4. Mailing address for future correspondence:  CARL Eghart  (Name)  CO BOX 457 F  (Address)  Home DAL, TD AHO 83628  (City) (State) (Zipcode)	5. Name and address for this acknowledgment copy is (if other than # 4):  (Name)  (Address)  (City) (State) (Zipcode)
Printed Name: CAPLL Egbant  Signature: Carl Eglant  Printed Name:  Signature:  Printed Name:	Secretary of State use only  IDAHO SECRETARY OF STATE  11/14/2016 05:00  CK:7527 CT:331139 BH:1555042  10 25.00 = 25.00 ASSUM NAME #2

Rev. 08/2015

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