



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2017 FEB 22 AM 8:59

SECRETARY OF STATE
STATE OF IDAHO

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

Square-Stone Insurance LLC 5122 N Lawsonia Pl Boise, ID 83713

(Name) W 101134 (Address)

(Name) _____ (Address) _____

(Name) _____ (Address) _____

(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:

Alana Patterson Holsinger

(Name) _____

5122 N Lawsonia Pl

(Address) _____

Boise ID 83713

(City) _____ (State) _____ (Zipcode) _____

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

(Name) _____

(Address) _____

(City) _____ (State) _____ (Zipcode) _____

Printed Name: Alana Patterson Holsinger

Signature: Alana Patterson Holsinger

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAO SECRETARY OF STATE

02/22/2017 05:00

CK:1157 CT:334335 BH:1570195
10 25.00 = 25.00 ASSUM NAME #2

D 192340