



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.  
Filing fee: \$25.00.

**FILED EFFECTIVE**

2016 OCT 20 PM 3: 54

SECRETARY OF STATE  
STATE OF IDAHO

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

AM/PM Property Management

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):

Bart HOLEMANS                      4850 Lakeview Place, Garden City, ID 83714

(Name)                                      (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 checked="" type="checkbox"/> Services | <input type="checkbox"/> Manufacturing | <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

Bart Holemans

(Name)

4850 Lakeview Place

(Address)

Garden City, ID, 83714

(City)                                      (State)                                      (Zipcode)

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

(Name)

(Address)

(City)                                      (State)                                      (Zipcode)

Printed Name: Bart HOLEMANS

Signature: *Bart Holemans*

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

10/20/2016 05:00

CK:172 CT:278003 BH:1551770

1@ 25.00 = 25.00 ASSUM NAME #2

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