

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

Printed Name:

Signature:

Printed Name: ____

Signature:

FILED EFFECTIVE

ANSOCT 19

SECRETARY OF 45

STATES IS:

| | ntity names and business add | |
|--|---------------------------------|--|
| the assumed business | name (do not include the name y | dress(es) of those doing business under |
| ADAM LACKNER | 575 TRAIL ROAD, VI | , |
| (Name) | (Address) | |
| Wholesale Trade | Agriculture | ☐ Transportation and Public Utilities☐ Mining |
| Services | Manufacturing | Finance, Insurance, and Real Estate |
| ☐ Services Mailing address for futu | _ | _ |
| Mailing address for futu | _ | 5. Name and address for this acknowledgment |
| Mailing address for futu ADAM LACKNER (Name) | _ | 5. Name and address for this acknowledgment |
| Mailing address for futu | re correspondence: 5 | 5. Name and address for this acknowledgment copy is (if other than #4): |

Rev. 08/2015

CK:1081 CT:315865 BH:1497011 10 25.00 = 25.00 ASSUM NAME #2

10/20/2015 05:00

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