



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

F.

## FILED EFFECTIVE

2017 APR -4 PM 1:00

SECRETARY OF STATE  
STATE OF IDAHO

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

E.M.A.F.A.

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):

GREG K. EVANS  
(Name)

1019 11<sup>th</sup> AVE. NORTH, NAMPA, ID 83687  
(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

3. The general type of business transacted under the assumed business name is:

☐ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

GREG K. EVANS  
(Name)

1019 11<sup>th</sup> AVE NORTH  
(Address)

NAMPA  
(City)

IO  
(State)

83687  
(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: GREG K. EVANS

Signature: Greg K. Evans

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

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

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE

04/04/2017 05:00

CK:CASH CT:158010 BH:1577218  
1@ 25.00 = 25.00 ASSUM NAME #2

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