

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

## FILED EFFECTIVE

2015 JAN -5 AN 9: 06

STATE OF IDEAS

## Please type or print legibly. Instructions are included on back of application.

Shine	
The true name(s) and <u>business</u> address(business under the assumed business n	
<u>Name</u>	<del></del>
Lisa Funk	201 Nancy Drive Burley, ID 83318
The general type of business transacted	under the assumed business name is:
Retail Trade Transportat	tion and Public Utilities
☐ Wholesale Trade ☐ Construction	on
Services Agriculture	
Manufacturing Mining	Submit Certificate of
Finance, Insurance, and Real Esta	Assumed Business
Finance, insulance, and Real Esta	Name and \$25.00 fee to:
The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
Lisa Funk	PO Box 83720
201 Nancy Drive Burley, ID 83318	Boise ID 83720-0080
	208 334-2301
Name and address for this acknowledge	nent
COPY IS (if other than # 4 above):	none
to (if other than # 4 above).	
	-
	Secretary of State use only
(P) (P)	_ Secretary or state use only
ture:	TELLO COCODERTOL OF SM
ed Name: Lisa Funk	IDANO SECRETARY OF ST
d Name. 200 Com	<b>01/05/2015 05:</b>

CK:173282 CT:158010 BH:1455420 1@ 25:00 = 25:00 ASSUM NAME #2

D 175832

Signature:

Printed Name:

Capacity/Title: \_\_