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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bu Please type or print legibly.	NAME e undersigned usiness Name.FILED EFFECTIVE 12 APR 20 AM 8: 49
Instructions are included on back of application. SECRETARY OF STATE STATE OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: Instructions are included on back of application.	
Dangerously Creative Enterprises 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name Complete Address Alexander Henkoski P.O. Box 750 Athol, Idaho 83801	
 3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Alexander HenKosK; P.O. Box 750 Ath ol, ID 83801 5. Name and address for this acknowledgment copy is (if other than #4 above): 	and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: <u>Alexander Henkoski</u> Printed Name: <u>Alexander Henkoski</u> Capacity/Title: <u>Owner</u> Signature: Printed Name: Capacity/Title:	Secretary of State use only IDAHO SECRETARY OF STATE 04/20/2012 05:00 CK: 1094 CT: 158018 BH: 1320623 1 @ 25.00 = 25.00 ASSUM NAME # 2 DISSO05