	CERTIFICATE OF ASSUM (Please type or print legibly. S		iona on roverse \
	To the SECRETARY OF STATE, STATE  Pursuant to Section 53-504, Idal  gives notice of adoption of an As	ho Code, th	ne undersigned 📆 👼
1.	The assumed business name which the un	dersigned	use(s) in the transactione f
	business is: KT Company	,	4 9: 56 HO
2.	The true name(s) and business address(es business under the assumed business name		ity or individual(s) doing
	Name		omplete Address
	Karen Jo Henson	_	Jornan
		Coeur	d'Alene ID 83815
3.	<ol> <li>The general type of business transacted under the assumed business name is: (mark only those that apply)</li> </ol>		
	☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	F	ransportation and Public Utilities inance, Insurance, and Real Estate fining
4.	The name and address to which future correspondence should be addressed:	hone numb	per (optional):
	1823 Norman	·	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
5.	Courd Alene, ID 83815  Name and address for this acknowledgment copy is (if other than # 4 above):	nt	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
1_			Secretary of State use only
Signatu		Revision 12/99	ILED EFFECTIVE
•	( T)		
Printed	Name: Name Do Henson	stabn.p65	IDAHO SECRETARY OF STATE 03/25/2003 05:00 CK: 2507 CT: 150010 BH: 670657

(see instruction # 8 on back of form)

1 8 20.00 = 20.00 ASSUM NAME # 2

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