

Signature: ____

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

2017 MAR 23 AM 9: 06

SECRETARY OF STATE

1.	The assumed business name which the undersigned use(s) in the transaction of business is: STATE OF IDAHO STATE			
2.				
	Michael J Quinn		ent V	Way Ste 312, Coeur d'Alene, ID 83815
	(Name)	(Address)		
	(Maine)	(Address)		
2. 3. 4. Się Pr	(Name)	(Audress)	·	
	(Name)	(Address)		
3.	The general type of business transacted under the assumed business name is:			
	Retail TradeWholesale TradeServices	ConstructionAgricultureManufacturing		Transportation and Public UtilitiesMiningFinance, Insurance, and Real Estate
4.	Mailing address for future	correspondence:	5.	5. Name and address for this acknowledgment copy is (if other than #4):
	Michael J Quinn			
	(Name) 2900 N. Government Wa	y Ste 312		(Name)
	(Adgress)			(Accless)
	Coeur d'Alene, ID 83815	(State) (Ziprode)		(City) (State) (Zipcode)
Pr	Printed Name: Michael J Quinn			Secretary of State use only
Si	Signature: Monthly			IDAHO SECRETARY OF STATE
₽ı	Printed Name:			03/23/2017 05:00 CK:5494 CT:336649 BH:1575150
				10 25.00 = 25.00 ASSUM NAME #2
SI	gnature:			
Pr	inted Name:			TIGHTOU

Rev. 08/2015

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