

Signature:__

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2017 SEP 25 AN 10: 20

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned Arbeiten K9 Services	ed (use(s) in the transaction of business is:	
2.	The individual and/or entity names and business act the assumed business name (do not include the name Jody M. Jeske Sr. 2373 Julie Lane Twin		you listed in #1):	
2	The general type of business transacted under the	. 26	crimad hircinase name is:	
J .	☐ Retail Trade ☐ Construction ☐ Wholesale Trade ☐ Agriculture ☐ Manufacturing	: a 5	Transportation and Public Utilities Mining Finance, Insurance, and Real Estate	
4.	Mailing address for future correspondence: Arbeiten K9 Services c/o Jody M. Jeske Sr	5.	Name and address for this acknowledgment copy is (if other than # 4):	
	2373 Julie Lane			
	Twin Falls Idaho 83301			
Pr Si	gnature: Jody M. Jeske Sr.		Secretary of State use only	
	rinted Name:		IDAHO SECRETARY OF STATE	
Si	ignature:		09/25/2017 05:00 CK:2913 CT:346091 BH:1604352	
Pr	rinted Name:		16 25.00 = 25.00 ASSUM NAME #2	

İ

Rev. 08/2015

D197315