



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2015 JUL 10 PM 12: 23

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

LAM Management

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Linda Myrland
(Name)

261 7th Ave East
(Address)

Twin Falls
(City)

Id
(State)

83301
(Zipcode)

(Name)

(Address)

(City)

(State)

(Zipcode)

(Name)

(Address)

(City)

(State)

(Zipcode)

3. The general type of business transacted under the assumed business name is:

☐ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Linda Myrland
(Name)

261 7th Ave East
(Address)

Twin Falls Id 83301
(City) (State) (Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Linda Myrland

Signature: [Signature]

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

07/10/2015 05:00

CK:7944 CT:125998 BH:1483373
10 25.00 = 25.00 ASSUM NAME #2

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