

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2018 JUN -6 AM 8: 39

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned use(s) in the transaction of business is: The Lemonade Sisters		
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):		
	Sarah Abraham		onners Ferry, ID 83805
	(Name) Grace Abraham	(Address) 249 Caprine Lane, Bonners Ferry, ID 83805 (Address)	
	(Name) Angela Abraham		onners Ferry, ID 83805
	(Name)	(Address)	
	(Name)	(Address)	
3.	The general type of business transacted under the assumed business name is:		
	Retail Trade	Construction	☐ Transportation and Public Utilities
	☐ Wholesale Trade☐ Services	☐ Agriculture ☐ Manufacturing	☐ Mining☐ Finance, Insurance, and Real Estate
4.	Mailing address for future correspondence: 5. Name and address for this acknowledgment copy is (if other than # 4): Sarah Abraham		
	(Name)		(Name)
	249 Caprine Lane		
	(Address) Bonners Ferry, ID 83805		(Address)
	(City)	(State) (Zipcode)	(City) (State) (Zipcode)
Printed Name: Sarah Abraham			Secretary of State use only
Signature: Swell Abruliam			
Printed Name: Grace Abraham			IDANO SECRETARY OF STATE 06/06/2018 05:00
Signature: Trade Abraham			CK:701 CT:358799 BH:1647442 10 25.00 = 25.00 ASSUM NAME #2
Pri	nted Name: Angela Abraha	am	
Sig	gnature: <u>Augla Al</u>	<u>NOUNAUL</u> Rev. 08/2015	D 203226