

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.



	STATE OF STATE
1. The assumed business name which the undersign	
The state of the s	Jan Olica
The individual and/or entity names and business a the assumed business name (do not include the name	address(es) of those doing business under goulisted in #1):
Robin R TanberT (Address)	P.O. Box 534 Cocolalla Id 83813
(Name) (Address)	
(Name) (Address)	
(Name) (Address)	
3. The general type of business transacted under the	e assumed business name is:
☐ Retail Trade ☐ Construction ☐ Wholesale Trade ☐ Agriculture ☒ Services ☐ Manufacturing	☐ Transportation and Public Utilities ☐ Mining
Services Manufacturing	Finance, Insurance, and Real Estate
4. Mailing address for future correspondence:	5. Name and address for this acknowledgment copy is (if other than #4):
Robin R TarberT	(Name)
P.O. Box 534 (Address)	(Address)
Cocolalla Id 83813 (City) (State) (Zipcode)	(City) (State) (Zipcode)
Printed Name: Robin R Tarbert	Secretary of State use only
Signature Cob in Q Nanbort	
Printed Name:	IDAHO SECRETARY OF STATE
Signature:	08/16/2016 05:00 CK:1237 CT:327906 BH:1542055
Printed Name:	16 25.00 = 25.00 ASSUM NAME #2
Signature:	D188546

Rev. 08/2015