

Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

2015 SEP -1 AM 8: 52

. The assumed business name	which the undersign	ned	use(s) in the	SECRETAR tran sactio r0	y Or State of business	s is:
2. The individual and/or entity notity the assumed business name				ose doing bu	usiness und	der
Joel Mares	104 Southwest Ave, New Plymouth, ID 83655					
^(Name) Juana Mares	(Address) 104 Southwest Ave, New Plymouth, ID 83655					
(Name)	(Address)					
(Name)	(Address)					
(Name)	(Address)			· · · · · · · · · · · · · · · · · · ·		
B. The general type of business Retail Trade Wholesale Trade ⊠ Services	transacted under the Construction Agriculture Manufacturing		Trans Minii	sportation ar	nd Public U	
Mailing address for future cor Joel Mares	respondence:	5 .	Name and a copy is (if other		his acknow	ledgment
(Name)			(Name)			
104 Southwest Ave			, ,			
(Address) New Plymouth ID	83655		(Address)			"
(City) (State			(City)		(State)	(Zipcode)
inted Name: Joel Mares			Secretary of State use only			
Signature:				IDINA enen	77120 to 200	
Printed Name: Juana Mares			IDAHO SECRETARY OF STATE 09/01/2015 05:00 CK:101 CT:314081 BH:1490435			
Signature: Juana Mayes			16 2	5.00 = 25	.00 ASSUM	4 NAME #2
Printed Name: JOEI MA	arcs					

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