| 227  |   |   |
|--|---|---|
|  | CERTIFICATE OF<br>ASSUMED BUSINESS<br>Pursuant to Section 53-504, Idaho Code, th<br>submits for filing a certificate of Assumed E   | S NAME<br>the undersigned FILED EFFECTIVE   |
| Please type or print legibly.<br>Instructions are included on back of applica  |   | SECRETARY OF STATE  |
| DI   | he assumed business name which the un<br>usiness is:<br>My Comer Office   |   |
| 2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: <u>Name</u> <u>Complete Address</u> |   |   |
| 1  | Tesha Swensen   | 30430 N Alice Ct  |
|  |   | Athei ID 83801  |
| 4. Tr<br>200<br>4. Tr<br>200<br>76<br>30<br>20   | ne general type of business transacted ur         Retail Trade       Transportation         Wholesale Trade       Construction         Services       Agriculture         Manufacturing       Mining         Finance, Insurance, and Real Estate         ne name and address to which future         who we have a should be addressed:         Who we have a should be addressed at the should be addressed:         Who we have a should be addressed at the should be addressed at the should be addressed at the should be addresshould be addressed at the should be address for this a | n and Public Utilities<br>Submit Certificate of<br>Assumed Business<br>Name and <b>\$25.00</b> fee to:<br>Secretary of State<br>450 North 4th Street<br>PO Box 83720<br>Boise ID 83720-0080<br>208 334-2301 |
| Co<br>   | py is (if other than # 4 above):<br>e: <u>Jeans Surensch</u><br>lame: <u>Tesha Swensen</u><br>/Title: <u>Owner</u>  | Secretary of State use only   |
| Signature: IDAHO SECRETARY OF STATE  |   |   |
| Printed Name:  |   | 03/05/2014 05:00<br>CK: 1606 CT: 158018 BH: 1413688   |
|  | /Title:   | 1 2 25.00 = 25.00 ASSUN NAME # 2  |
| v21/2012 abr.pmd Rev. 07/2010  |   | .D169421  |