

Signature:_____

CERTIFICATE OF **ASSUMED BUSINESS NAME**

FILED EFFECTIVE

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

Filing fee: \$25.00.

2015 SEP 18 PM 1:29

SECRETARY OF STATE

1.	The assumed business name which the undersigned use(s) in the transaction of business is: Flos Carmeli Violets						
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):						
	Joseph Burke	10465 Excalibur	Boise	e, ID 83704			
	(Name)	(Address)					
	Susan Burke	10465 Excalibur	Boise	e, ID 83704			
	((tasi obs)					
	(Name)	(Address)					
	(Name)	(Address)	<u>.</u>				
3.	The general type of business transacted under the assumed business name is:						
J.							
	Retail Trade Construction			Transportation and Public Utilities			
		☐ Agriculture☐ Manufacturir	20	☐ Mining	surance, and Re	al Estate	
	Oervices	wandidotoiii	'9		isurance, and ite	ai LState	
4.	Mailing address for future	correspondence:	5.	Name and addres		viedgment	
				same	,		
	(Name)			(Name)		<u> </u>	
	10465 Excalibur						
	(Address) Boise, ID 83704			(Address)			
	(City)	(State) (Zipcode)		(City)	(State)	(Zipcode)	
Printed Name: Joseph Burke				Secreta	ry of State use only		
Sig	gnature: <u>} execul</u>	Busho					
Printed Name: Susah Burke				IDAHO SECRETARY OF STATE 09/18/2015 05:00			
				CK:1502 CT:314754 BH:1492885			
Sig	gnature: <u>Ausun E</u>	Burke		1@ 25.00 =	= 25.00 ASSUM	NAME #2	
Printed Name: Susan E. Burke				710	21510		
Signature:				W101247			

Rev. 08/2015