

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

OWNER/PRESIDENT

(see instruction # 8 on back of form)

Capacity/Title:

09 JUL 27 AM 9: 1

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

THE WOLLI-	SERVICES	
The true name(s) and business address(es) business under the assumed business name Name  LAURA SIMAS		
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Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720	
LAURA SIMAS	Boise ID 83720-0080	
6050 E FRAZIER	(208) 334-2301	:
POST FALLS, ID 83854		
i. Name and address for this acknowledgmer COpy is (if other than # 4 above):	nt	•
	Secretary of State use only	
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