

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

FILED EFFECTIVE

2015 MAY 26 AM 10: 04

business is:	
Camp House fulfillment	
The true name(s) and <u>business</u> address(es business under the assumed business name	ne:
<u>Name</u>	Complete Address
Danica E Colley	1217 S Broadway Ave, Ste #105 PMB 256
	Boise, ID 83706
☐ Services☐ Manufacturing☐ Mining☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Danica Colley	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
The name and address to which future correspondence should be addressed: Danica Colley 1217 S Broadway Ave, Ste #105 PMB 256	Secretary of State 450 North 4th Street PO Box 83720
The name and address to which future correspondence should be addressed: Danica Colley 1217 S Broadway Ave, Ste #105 PMB 256 Boise, ID 83706	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
The name and address to which future correspondence should be addressed: Danica Colley 1217 S Broadway Ave, Ste #105 PMB 256 Boise, ID 83706	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
The name and address to which future correspondence should be addressed: Danica Colley 1217 S Broadway Ave, Ste #105 PMB 256 Boise, ID 83706 Name and address for this acknowledgment	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301

IDAHO SECRETARY OF STATE 05/27/2015 05:00

CK:1911 CT:310661 BH:1477063 16 25.00 = 25.00 ASSUM NAME #2

) (79290

Printed Name: Danica E. Colley

Capacity/Title: Owner

Signature:

Printed Name: _____

Capacity/Title: _____