

Signature:\_\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

## FILED EFFECTIVE

2016 MAY 23 AM 9: 43

1 The assumed husiness name which the	SECRETARY OF STATE e undersigned use(s) in the transaction of businessis:
	ME ASSISTANCE
<ol><li>The individual and/or entity names and the assumed business name (do not incl</li></ol>	business address(es) of those doing business under lude the name you listed in #1):
SANDI FRANCIS (Name) (Address)	1271 W. Quinn Rd
(Name) (Address)	Pocatello, 10 83202
·	
(Name) (Address)	
(Name) (Address)	
3. The general type of business transacte	ed under the assumed business name is:
	struction
	nufacturing Finance, Insurance, and Real Estate
4. Mailing address for future corresponde	nce: 5. Name and address for this acknowledgment copy is (if other than # 4):
(Name) SABLE Home House	Name)
(Address) III - Se	(Address)
$\frac{10cA}{\text{(City)}}$	Zipcode) (City) (State) (Zipcode)
Printed Name: SANDI FRANZ	Secretary of State use only
Signature: Sandi Filance	IDANO SECRETARY OF STATE 05/23/2016 05:00
Printed Name:	CK: 26830915 CT: 116317 BH: 1529978  16 25.00 = 25.00 ASSUM NAME #2
Signature:	— D186728
Printed Name:	

Rev. 08/2015