CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 33-504, Idaho Code, the undersigned aubmits for tiling a certificate of Assumed Business Name. Please type or print legibly. NOTE: See Instructions on reverse before filing. If Class Carpet Carc If Class Carpet Carc Assumed Business name: Name Complete Address Kyle: M*CormicK Assumed Business transacted under the assumed business name is: Retail Trade Retail Trade Assumed Business Agriculture Annote, and Real Estate Annote, Insurance, and Real Estate Annote and address for this acknowledgment Copy is (if other than # 4 acres): Support Support Assumed Business	227	
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name Complete Address Kyle_MCORMICK 692 MaplewOod #3 Lynice MCORMICK (nikki) POSt Fails, ID 83854 POSt Fails, ID 83854 3. The general type of business transacted under the assumed business name is: POSt Fails, ID 83854 3. The general type of business transacted under the assumed business name is: POSt Fails, ID 83854 3. The general type of business transacted under the assumed business name is: POSt Fails, ID 83854 3. The general type of business transacted under the assumed business name is: POSt Fails, ID 83854 4. The name and address to which future correspondence should be addressed: Secretary of State 700 West Jefferson Basement West Agric_Cass Carpet Cure PO Box 83720 Agric_I ID 833854 Doise ID 83720-0080 5. Name and address for this acknowledgment copy is (if other than # 4 above): Phone number (optional): Secretary of State use only Secretary of State use only ature: MACommune, Kyle mCormic K, city: <u>Owner (op State use only</u>) Secretary of State use only Secretary of State use only Secretary of State use only Secretary of State use only	Submits for filing a certificate of Assumed Bu <u>Please type or print legibly.</u> <u>NOTE: See instructions on reverse before</u> 1. The assumed business name which the under business is:	NAME a undersigned siness Name. a filing. a filing. a filing. b filing. a filing. b filing.
Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate Submit Certificate of Assumed Business Name and address to which future correspondence should be addressed: Secretary of State 700 West Jefferson Basement West PO Box 63720 Boise ID 83720-0080 208 334-2301 5. Name and address for this acknowledgment copy is (if other than # 4 above): Phone number (optional): Secretary of State use only Secretary of State 90 State 100 S	 The true name(s) and <u>business</u> address(es) or business under the assumed business name: <u>Name</u> <u>Kyle_M^cCormicK</u> 69 <u>Lynice_M^cCormicK (nikki)</u> 7 	f the entity or individual(s) doing <u>Complete Address</u> 92 Mapiewood #3 OST Falks, ID 83854.
	Retail Frade Transportation an Wholesale Trade Construction Services Agriculture Agriculture Manufacturing Mining Finance, Insurance, and Real Estate Finance, Insurance, and Real Estate A. The name and address to which future correspondence should be addressed: A The name and address to which future correspondence should be addressed: A The name and address to which future correspondence should be addressed: A The name and address to which future correspondence should be addressed: A The name and address to which future correspondence should be addressed: A The name and address for this acknowledgment copy is (if other than # 4 above): A Name and address for this acknowledgment copy is (if other than # 4 above): A Name: Ky/e m ^c Cormick correction (Manufacture)	d Public Utilities