

## CERTIFICATE OF **ASSUMED BUSINESS NAME**

108'APR 21 AM 8: 55

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

FILED AND THE SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

The true name(s) and business address(es) or business under the assumed business name:     Name	f the entity or individual(s) doing  Complete Address
- Jah Ellis	1615 levick St. #3 Muscou ID 83843
3. The general type of business transacted under  Retail Trade ☐ Transportation and Wholesale Trade ☐ Construction General Manufacturing ☐ Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  SHA EIIS  JUIS Levick SL #3  MISCOU ID \$3843	
<ol> <li>Name and address for this acknowledgment copy is (if other than # 4 above);</li> </ol>	
	Secretary of State use only
ignature: (signature required)  rinted Name: SHA L. Elli3  apacity/Title: Owner  (see instruction # 8 on back of fem.)	

1 # 25.00 = 25.00 ASSUM MAME # 2

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