

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

Signature:

2017 JAH SPAFSFECTIVE

					20. OW OO MI 2. 22	
1.	The assumed business name which the undersigned use(*) in the transfer of the business is: Salmon Rental Solutions					
2.	The individual and/or entity names and business address(es) of those doing business under					
	the assumed business name (do not include the name you listed in #1):					
	Donald Wade	PO Box 81, Tendoy ID 83468				
	(Name)	(Address)				
	Teresa Wade	PO Box 81, Tendoy ID 83468				
	(Name)	(Address)				
	(Name)	(Address)		· · · · · · · · · · · · · · · · · · ·		
	, ,,	(* 1047, 342)				
	(Name)	(Address)				
3.	The general type of business transacted under the assumed business name is:					
	Retail Trade	Construction			1	
	Wholesale Trade	Agriculture			Transportation and Public Utilities	
	Services	☐ Agriculture ☐ Manufacturing			Mining	
	Services	□ Manulaculing			Finance, Insurance, and Real Estate	
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4.	Mailing address for future correspondence:		5.		e and address for this acknowledgment	
	Calman Dantal Calutions			сору	İS (if other than # 4).	
	Salmon Rental Solutions (Name)					
	PO Box 81			(Name)		
	(Address)			(Address	\$)	
	Tendoy ID 83468					
	(City)	(State) (Zipcode)		(City)	(State) (Zipcode)	
D-i	nted Name: Donald Wade		<u></u>			
FII	meu Name.				Secretary of State use only	
Sig	gnature:				IDAHO SECRETARY OF STATE	
Printed Name: Teresa Wade					01/31/2017 05:00	
	Ma 1	1/2			CK: 2083 CT: 158010 BH: 1566488	
Sig	gnature: <u> </u>	rive	Ì		16 25.00 = 25.00 ASSUM NAME #2	
Pri	nted Name:				7191901	
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