

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

Signature:

Printed Name:

Signature: ____

FILEPOFFERTING

10/11/2017 05:00 CK:167 CT:346819 BH:1606788

1@ 25.00 = 25.00 ASSUM NAME #2

A The second best one	and the state of the state of the state of	SECRETARY OF STATE
		ed use(s) in the transaction of pusiness is:
Kapid Re	ivenue Recoveru	
•		ı e
2. The individual and/or e	ntity names and business ad	ddress(es) of those doing business under
	name (do <u>not</u> include the name	
Natalie Thans	on 419 Creston	ood dr. Nampa ID 83686
(Name)	(Address)	,
(Name)	(Address)	
, ,	,	
(Name)	(Address)	
(Name)	(Address)	
(Hamoy	(* 120.000)	
3. The general type of but	siness transacted under the	assumed business name is:
3 .		P***
Retail Trade Wholesale Trade	☐ Construction ☐ Agriculture	Transportation and Public UtilitiesMining
Services	Manufacturing	Finance, Insurance, and Real Estate
~		
4 Mailing addrage for futu	iro corrochandanos.	5. Name and address for this asknowledgment
4. Mailing address for futu	ire correspondence.	5. Name and address for this acknowledgment copy is (if other than # 4):
Natalia Tha	00 (1) 0	
(Name)	1	(Name)
(Address)	<u>dr</u>	(Address)
Namin	ID 93686	(Address)
(City)	(State) (Zipcode)	(City) (State) (Zipcode)
. 1		
Printed Name: <u>Natali L</u>	Thomson	Secretary of State use only
Signature: Mwax	Thy	
V -		IDAHO SECRETARY OF STATE
Printed Name:		10/11/2017 05:00

Rev. 08/2015