FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

2018 MAY 21 AM 10: 17

SECRETARY OF STATE STATE OF IDAHO

1.	Teton Region Composite	ne which the undersign	ed	use(s) in the transaction of business is:	
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):				
	Teton Valley Composite 9290 Edgewood Ln.			ctor. ID 83455	
	(Name)	(Address)			
	<u>u 4753</u>				
	(Name)	(Address)			
	(Name)	(Address)	<u></u>		
	(Name)	(Address)			
3.	The general type of business transacted under the assumed business name is:				
	☐ Retail Trade ☐ Wholesale Trade ☒ Services	ConstructionAgricultureManufacturing		☐ Transportation and Public Utilities☐ Mining☐ Finance, Insurance, and Real Estate	
4. Pri	Mailing address for future control Valley Composite (Name) 9290 Edgewood Ln. (Address) Victor, ID 83455 (City) (State of the Name: Amanda Carey	orrespondence:	5.	Name and address for this acknowledgment copy is (if other than # 4): Teton Valley Composite (Name) 9290 Edgewood Ln. (Address) Victor, ID 83455 (City) (State) (Zipcode)	
Signature: Wash Cen			1	Secretary of State use only	
1				IDAHO SECRETARY OF STATE	
PF	Printed Name:			05/22/2018 05:00	
Signature:				CK:1655 CT:335385 BH:1645009 18 25.00 = 25.00 ASSUM NAME #2	
Printed Name:				D202938	
Sic	gnature:			D = 40	