

## CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

FILED EFFECTIVE

2017 MAY 11 AM 10: 19 SECRETARY OF STATE STATE OF IDAM

1	he assumed business name which the undersigned use(s) in the transaction of business is:		
١.	Focal Point Furniture & Design		
	<u> 10101                                </u>	JINT FLUMITA	re a Design
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1): <u>Cavrianne</u> Recla 1414 N. 1645 Bolse ID 83702  (Name) (Address)		
	(Name)	(Address)	
	(Name)	(Address)	
		(	
	(Name)	(Address)	
3.	The general type of business transacted under the assumed business name is:		
	<ul><li>Retail Trade</li><li>Wholesale Trade</li><li>Services</li></ul>	Construction Agriculture Manufacturing	<ul><li>Transportation and Public Utilities</li><li>Mining</li><li>Finance, Insurance, and Real Estate</li></ul>
4.	Mailing address for future correspondence:  Carrianne Recla (Name) 144 N 164 St (Address) 8015e TD 83702		5. Name and address for this acknowledgment copy is (if other than # 4):  (Name)
			(Address)
	(City) (	State) (Zipcode)	(City) (State) (Zipcode)
Printed Name: Carrianne Recla			Secretary of State use only
Signature:			IDAHO SECRETARY OF STATE
Printed Name:			05/11/2017 05:00 CK:13382356 CT:172099 BH:1583519
Signature:			1@ 25.00 = 25.00 ASSUM NAME #2
	inted Name:		
Signature:			D 194338

Rev. 08/2015