

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

10 OCT 13 AM 9: 46

Please type or print legibly. Instructions are included on back of application.

STATE OF IDAHO

1.	The assumed business name which the under business is: Alike Links	ersigned use(s) in the transaction of
2.	The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Jaime Davis	of the entity or individual(s) doing Complete Address 399 N. 30 ^{-th} St. Apt Fior 80ise 10 8370
3.		er the assumed business name is: nd Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: Taime Davis, Plike Links 399 n. 2012 St Apt Flor Boise, 10 83702	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	
		Secretary of State use only
Signa		
	d Name: JAIME DAVIS	
Capacity/Title: Owner Operator		IDAHO SECRETARY OF STATE
Signature:		CK: CASH CT: 158018 BH: 1242915 1 8 25.88 = 25.88 ASSUM NAME # 2
	d Name:	2 2 20220 20220 1122
Capac	city/Title:	D 142742
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