

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2014 MAY 27 AM (0: 03

SECRETATI (F STATE STATE OF 101140

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

The assumed business name which the undersign business is:	
Melanie Grace De	SIANS
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name:  Name  Makers LLC w jur777	J
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Services Agriculture  Manufacturing Mining	Public Utilities  Submit Certificate of
Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Melanie Habets  148 Kaven Ln.  Caremweed 10 83809	Assumed Business Name and \$25.00 fee to:  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):	<del>I</del>
	Secretary of State use only
inted Name: <u>Melanic Habets</u> apacity/Title: <u>Member</u>	IDAHO SECRETARY OF STATE 05/27/2014 05:00 CK:405 CT:267834 BH:14264

CK:405 CT:267834 BH:1426458 10 25.00 = 25.00 ASSUM NAME #2

D111497

Signature:

Printed Name:

Capacity/Title:\_\_\_