



CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVE

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

Filing fee: \$25.00.

2016 AUG 15 AM 10:23

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

K N Home Repair

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):

Kent E. Niles 3617 E. Spectrum Dr. Idaho Falls Id 83401
(Name) (Address)

(Name) (Address)

(Name) (Address)

(Name) (Address)

3. The general type of business transacted under the assumed business name is:

- | | | |
|--|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Construction | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

Kent Niles
(Name)
3617 E. Spectrum Dr.
(Address)
Idaho Falls Id. 83401
(City) (State) (Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

(Name)
(Address)
(City) (State) (Zipcode)

Printed Name: Kent E. Niles

Signature: Kent E. Niles

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

08/16/2016 05:00

CK:1006 CT:158010 BH:1542043
10 25.00 = 25.00 ASSUM NAME #2

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