

Capacity/Title:_

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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

2014 JAN 21 AM 9: 57

SECRETARY OF STATE STATE OF IDAHO

Remote Office Solutions	
The true name(s) and <u>business</u> address business under the assumed business <u>Name</u> Allison Danyel Baker	s(es) of the entity or individual(s) doing name: <u>Complete Address</u> 1302 Ponderosa Ave, McCall, ID 83638
3. The general type of business transacted Retail Trade Transporta Wholesale Trade Constructi Agriculture Services Agriculture Manufacturing Mining Finance, Insurance, and Real Est. 4. The name and address to which future correspondence should be addressed: Remote Office Solutions 1302 Ponderosa Ave	e Submit Certificate of
McCall, ID 83638 5. Name and address for this acknowledge copy is (if other than # 4 above):	208 334-2301 ment
gnature: Wise ABale	Secretary of State use only
inted Name: Allison Danyel Baker	- N. 827
apacity/Title: Owner/Sole Proprietor	- D16827
gnature:	IDAHO SECRETARY OF STATE
· · · · · · · · · · · · · · · · · · ·	- 01/21/2014 05:00 CK: 1676358 CT: 172899 3H: 1486