

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

227	
CERTIFICATE O  ASSUMED BUSINES  Pursuant to Section 53-504, Idaho Code, submits for filing a certificate of Assumed  Please type or print legibly. Instructions are included on back of as	S NAME the undersigned Business Name.
The assumed business name which the u business is:     Iris DeMauro Designs	ndersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(e business under the assumed business na Name  The Phi Center, LLC  (W130814)	es) of the entity or individual(s) doing me: <u>Complete Address</u> 164 Cosmos Lane, Clark Fork, Idaho 83811
3. The general type of business transacted under the Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of
4. The name and address to which future correspondence should be addressed:  Iris A. DeMauro  P.O. Box 433  Clark Fork, Idaho 83811	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above): Stephen F. Smith, Attorney at Law P.O. Box C	nt
Signature: de Al Mauro  Printed Name: Iris A. DeMauro	Secretary of State use only
Capacity/Title: Manager	

IDAHO SECRETARY OF STATE
11/04/2013 05:00
CK: 1425 CT: 149888 BH: 1396639
1 8 25.88 = 25.88 ASSUM NAME # 2

ORIGINAL

Printed Name: Capacity/Title:

Signature: \_\_\_

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