



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2017 APR -6 AM 9:09

SECRETARY OF STATE
STATE OF IDAHO

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

Kali Ragz

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):

NOEL LEON 733 N. Main St # F Bellevue ID 83313

Name

Address

Name

Address

Name

Address

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



Retail Trade



Construction



Transportation and Public Utilities



Wholesale Trade



Agriculture



Mining



Services



Manufacturing



Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

NOEL LEON

P.O. Box 5708

Hailey IDAHO 83333

City

State

Zip Code

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

Name

Address

City State Zip Code

Printed Name: NOEL LEON

Signature: [Signature]

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/06/2017 05:00

CK:10764070985 CT:337522 BH:1577718

1@ 25.00 = 25.00 ASSUM NAME #2

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