

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2017 OCT -2 AM 10: 25

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned use(s) in the transaction of business is: SCARLETRIDGE ENTERPRISES						
		_					
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):						
	ROSS ZILLES	3855 WEST 2200 SOUTH, WESTON, ID 83286					
	(Name)	(Address)	(Address)				
	(Name)	(Address)					
	(Name)	(Address)					
	(Name)	(Address)					
3.	The general type of business transacted under the assumed business name is:						
	☐ Retail Trade ☑ Wholesale Trade ☐ Services	Construction Agriculture Manufacturing	a	Mining	rtation and Public U , Insurance, and Re		
4.	Mailing address for future	correspondence:	5.	Name and add copy is (if other that	ress for this acknov n#4):	vledgment	
	ROSS ZILLES			(Name)			
	3855 WEST 200 SOUTH	1		, , , , , , , , , , , , , , , , , , ,			
	(Address)			(Address)			
	WESTON I	D 83286 (State) (Zipcode)		(City)	(State)	(Zipcode)	
Printed Name: ROSS ZILLES				Secretary of State use only			
Siç	gnature:						
Printed Name:				IDAHO SECRETARY OF STATE 10/03/2017 05:00			
Signature:				CK:4684 CT:158010 BH:1605568 16 25.00 = 25.00 ASSUM NAME #2			
Pri	inted Name:						
Signature:				D197472			

Rev. 08/2015