

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

Signature:

Printed Name: _____

Signature:

2015 JUL 16 AM 8: 50

			SECR	EJAR	Y OF STATI	<u> </u>
1.	The assumed business name which the undersign	ned use(s) i	STA in the transact	∏F C ion α	busiles	c s is:
	"The Folks" Estate planning and consulting services					
2.	The individual and/or entity names and business at the assumed business name (do not include the name			g bu	siness un	der
	Kymberlene Condie				···	<u>-</u> -
	2152 W. Forest Hill (Address)	Eagle (City)	(5	ID State)	83616 (Z)po	code)
	(Name)					
	(Address)	(City)	(5	State)	(Zip	code)
	(Name)	<u> </u>				
	(Address)	(City)	(8	State)	(Zip	code)
3.	The general type of business transacted under the ☐ Retail Trade ☐ Construction ☐ Wholesale Trade ☐ Agriculture ☐ Manufacturing	e assumed	business nam Transportatio Mining Finance, Insu	n an	d Public U	
4.	Mailing address for future correspondence:		and address (if other than #4):	for th	nis acknov	vledgment
_	rm Condie	(Name)				
(Ad	O. Box 2147 dress) agle ID 83616	(Address)		_ <u>_</u>		
(Ci	(State) (Zipcode)	(City)			(State)	(Zipcode)
Printed Name: Kym Condie Signature.		Secretary of State use only				
	inted Name:	1DAHO SECRETARY OF STATE 07/16/2015 05:00				
	HOO HAITO,		CK:1013 C'	T:3:	12451 BH	1-1484117

Rev. 07/2015

CK:1013 CT:312451 BH:1484117

16 25.00 = 25.00 ASSUM NAME #2

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