FILED EFFECTIVE



Signatura:

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

2817 SEP.22 AM 9: 22

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is: Collins Accounting Solutions	
2. The individual and/or entity names and business a the assumed business name (do not include the name (Address)	you listed in #1):
(Name) (Address)	
(Name) (Address)	
(Name) (Address)	
3. The general type of business transacted under the ☐ Retail Trade ☐ Construction ☐ Wholesale Trade ☐ Agriculture ☐ Manufacturing	Transportation and Public Utilities Mining Finance, Insurance, and Real Estate
4. Mailing address for future correspondence: Cassie Collins (Name) 554 E. 2nd S. (Address) Crace ID 8324 (City) (State)	5. Name and address for this acknowledgment copy is (if other than # 4): (Name) (Address) (City) (State) (Zipcode)
Printed Name: COSSIL COLLINS Signature: White Collins Printed Name: Signature:	Secretary of State use only IDAHO SECRETARY OF STATE 89/22/2017 05:00 CK:3003 CT:346012 BH:1604123 16 25.00 = 25.00 ASSUM NAME #2
Printed Name:	D 1972712