

227



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

00 DEC 12 AM 8:54

Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name

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

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2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Complete Address

Carol Jane Larsen

240 South Holmes, Ste D

Idaho Falls, ID. 83401

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

☒ Retail Trade

☐ Manufacturing

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Finance, Insurance, and Real Estate

☒ Services

☐ Construction

☐ Mining

4. The name and address to which future correspondence should be addressed:

Phone number (optional): 208 357 0526

Carol J. Larsen

344 E. Maple

Shelley Idaho 83274

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

as above

Signature: _____

Printed Name: CAROL LARSENCapacity: manager

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

12/12/2000 09:00
CK: 5591 CT: 139533 BH: 366177

1 @ 20.00 = 20.00 ASSUM NAME # 2

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