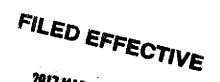


Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.



2017 MAR -1 AM 8:41

SECRETARY OF STATE

1.	STATE OF TATE 1. The assumed business name which the undersigned use(s) in the transaction of business is:	
	Bail Enforcement agents of Idaho	
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):	
	Sophy Hem P.O. Box 63	lewiston ID 83501
	Shely Bingham/Hem P.O. Box (Name) (Address)	63 lewiston In 83501
	(Name) (Address)	
	(Name) (Address)	
3. The general type of business transacted under the assumed business name is:		assumed business name is:
	Retail Trade Construction	Transportation and Public Utilities
	Wholesale Trade✓ Agriculture✓ Manufacturing	☐ Mining☐ Finance, Insurance, and Real Estate
4.	Mailing address for future correspondence:	5. Name and address for this acknowledgment copy is (if other than # 4):
	Sophy Hem	
	P.O. Box 63	(Name)
	Lewiston ID 83501	(Address)
	(City) (State) (Zipcode)	(City) (State) (Zipcode)
Pri	inted Name: Shelly Birlaham Henni	Secretary of State use only
Sic	gnature: Change	IDAHO SECRETARY OF STATE
	inted Name: Soony Hem	03/01/2017 05:00 CK:24255633352 CT:335310 BH:1571246
		16 25.00 = 25.00 ASSUM NAME #2
	gnature: Scopy Hen	N100520
Pri	nted Name:	0192539

Rev. 08/2015