



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

09 MAY 26 PM 12:37
SECRETARY OF STATE
STATE OF IDAHO

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

Common-Sense Solutions

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

Name

Pamela M. Harris

Ginger L. Cota

Complete Address

1211 E. 3rd Avenue, Post Falls, ID 83854

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3. The general type of business transacted under the assumed business name is:

- ☒ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☒ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

Pamela M. Harris, Manager

1211 E. 3rd Avenue

Post Falls, ID 83854

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

Signature:

Pamela M Harris

(signature required)

Printed Name:

Pamela M. Harris

Capacity/Title:

Manager

(see instruction # 8 on back of form)

Secretary of State use only

g:\corpforms\idn form\elnbn.p66
Revised 04/2003

IDAHO SECRETARY OF STATE
05/27/2009 05:00
CK: 5725 CT: 237433 IM: 1172941
1 @ 25.00 = 25.00 ASSUM NAME # 2

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FILED EFFECTIVE