

Signature:

Signature:

Printed Name:

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

## FILED EFFECTIVE

SECRETARY OF STATE 1. The assumed business name which the undersigned use(s) in the transatriba of business is: home away from home 2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1): 1480 Antares Dr. Idaho Falls, 10 83402 (Name) (Address) (Name) (Address) (Address) (Name) 3. The general type of business transacted under the assumed business name is: Retail Trade Construction Transportation and Public Utilities Agriculture Wholesale Trade Mining Services Manufacturing Finance, Insurance, and Real Estate 4. Mailing address for future correspondence: 5. Name and address for this acknowledgment CODY IS (if other than #4): (Name) (Address) (City) (State) (Zipcode) Printed Name: Kathy Secretary of State use only Signature: IDAHO SECRETARY OF STATE 04/23/2018 05:00 Printed Name:

Rev. 08/2015

CK:1061 CT:356697 BH:1639808 16 25.00 = 25.00 ASSUM NAME #2

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