

Printed Name: Sharmyn

Capacity/Title: 00 - owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAMED TOCT 12 PM 12: 17

Pursuant to Section 53-504, Idaho Code, the undersigned RETARY OF STATE submits for filing a certificate of Assumed Business Name TATE OF IDAHO

NOTE: See instructions on reverse before filing.

The true name(s) and business address(e business under the assumed business name to business name to business name to business address.	s) of the entity or individual(s) doing
Sharmyn Hansen	Complete Address 1978 W. Pine Creek Prive Nampa, Id. 83686
3. The general type of business transacted un	nder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State
Sharmyn Hansen 1978 W. Pine Creek Dr. WAMPA T. d. 83686	450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
 Name and address for this acknowledgme copy is (if other than # 4 above): 	ent .
	Secretary of State use only

