CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 DEC 26 AM 9: 01

Please type or print legibly. Instructions are included on back of application.

business is: 2. The true name(s) and business address(e business under the assumed business names)	
Name Michela Swarthout	Complete Address Los 67 Limeliant Boise, 10 83714
3. The general type of business transacted uses a large and the second s	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: MICHELA SWARTHOUT LISTORY BOISC, 10 85714 5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature:	Secretary of State use only
Printed Name: Michela Swarmovi Capacity/Title: owner Signature:	IDAHO SECRETARY OF STATE 12/26/2014 05:00 CK:223 CT:304481 BH:1454421 16 25.00 = 25.00 ASSUM NAME
Printed Name:Capacity/Title:	10000

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