

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2006 DEC -8 AM 9: 08

Please type or print legibly. NOTE: See instructions on reverse before filing.

2. The tare name(s) and husiness address(es) of the	
business under the assumed business name: Name Joel Kaarlela	ne entity or individual(s) doing Complete Address P.O. Box 84 Midvale, ID 83645
	P.O. Box 84 Midvale, ID 83645
Angel Kaarlela	P.O. BOX 04 Miluvale, ID 03043
 ☐ Retail Trade ☐ Wholesale Trade ☐ Construction ☐ Agriculture 	Submit Certificate of
☐ Manufacturing☐ Mining☐ Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
Joel & Angel Kaarlela	PO Box 83720
P.O. Box 84	Boise ID 83720-0080
Midvale, ID 83645	208 334-2301
5. Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than #4 above):	208-550-2510
	Secretary of State use only
ignature: Angle (signature requised)	
rinted Name: Angel M. Kaarlela apacity/Title: Owner apacity/Title: Angel M. Kaarlela Angel M. A	IDAHO SECRETARY OF S