

Signature:_

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2017 SEP 25 PM 3: 13
SECRETARY OF STATE
STATE OF IDAGE

1.	The assumed business nar	me which the undersign	ned use	iction of busines	IF IDAHOS.		
	STELLA EVEN			(-,			
						_ .	
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):						
	DAVID LUANY (Name)	(Address)	5	PHILLIPPI	St, Boist , L	<u>8 83705</u>	
	(Name)	(Address)					
	(Name)	(Address)			- <u> </u>		
	(Name)	(Address)					
3.	The general type of business transacted under the assumed business name is:						
	☐ Retail Trade ☐ Wholesale Trade	ConstructionAgricultureManufacturing		Mining	ion and Public U surance, and Re		
		wandlactumg		Fillance, in	surance, and ive	ai Lsiaic	
4.	Mailing address for future of	correspondence:		ame and addres	s for this acknow	rledgment	
	David Luang		(Na	ame)			
	957 5 PHILL PPI	st	(Ac	ddress)			
	Bois = (City) (S	16 83705 State) (Zipcode)	<u>(C</u>	ity)	(State)	(Zipcode)	
Pr	Printed Name: DAVIS LUANY			Secretar	y of State use only		
Si	gnature: Kavishi h		:	INIHA	SECRETARY OF S		
Pr	rinted Name:		09/25/2017 05:00 CK:14767020 CT:172099 BH:1604449				
Signature:					U CT:172099 E = 25.00 ASSUM		
Printed Name:				D10733/			

Rev. 08/2015