

Printed Name: ____

Signature:

Printed Name:

Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2015 OCT 23 PM 1: 45

STATE OF IDAHO

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

Ι.	The assumed business name which the undersign	ned use(s) in the transaction of business is.
	Knight N-Day Meaning	
)	
2.		· -
	the assumed business name (do not include the name	ne you listed in #1):
	Danielle Knighten 10954 W	J Bumble bee de Base 10 83713
	(Name) (Address)	
	(Name) (Address)	
	(Name) (Address)	
	(Name) (Address)	
3	The general type of business transacted under the	e assumed husiness name is:
J.		
	Retail Trade Construction	☐ Transportation and Public Utilities
	☐ Wholesale Trade ☐ Agriculture	☐ Mining
	Services	Finance, Insurance, and Real Estate
4.	Mailing address for future correspondence:	5. Name and address for this acknowledgment
	Donald Wash	COPY IS (if other than # 4):
	(Name)	(Name)
	10954 W Bumblebee DR	(Name)
	(Address)	(Address)
	Bose 10 83/13	
	(City) (State) (Zipcode)	(City) (State) (Zipcode)
	Do. 11 1/12 -11	
Pr	inted Name: Minielle Knighten	Secretary of State use only
٠.	mature: M. W. Karata	

Rev. 08/2015

IDAHO SECRETARY OF STATE
10/23/2015 05:00
CK:CASH CT:158010 BH:1497606
10/25.00 = 25.00 ASSUM NAME #2

D182226