



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2018 SEP 10 AM 9:53

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Ethington Solutions

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Samuel L. Ethington                      820 W 7th S Apt. 8101, Rexburg, ID 83440  
(Name)    (Address)

\_\_\_\_\_  
(Name)    (Address)

\_\_\_\_\_  
(Name)    (Address)

\_\_\_\_\_  
(Name)    (Address)

3. The general type of business transacted under the assumed business name is:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Retail Trade        | <input type="checkbox"/> Construction  | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade     | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Mining                              |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

Samuel Ethington  
(Name)  
820 W 7th S Apt. 8101  
(Address)  
Rexburg, Idaho 83440  
(City)    (State)                      (Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

\_\_\_\_\_  
(Name)  
\_\_\_\_\_  
(Address)  
\_\_\_\_\_  
(City)    (State)                      (Zipcode)

Printed Name: Samuel L. Ethington  
Signature:   
Printed Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Signature: \_\_\_\_\_

Secretary of State use only  
  
IDAHO SECRETARY OF STATE  
**09/11/2018 05:00**  
CK:1134 CT:363283 BH:1663437  
I@ 25.00 = 25.00 ASSUM NAME #2  
  
D205407