

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

(see instruction # 8 on back of form)

NOTE: See instructions on reverse befo	<u>re filing.</u>	
1. The assumed business name which the und business is:		ed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es business under the assumed business nam Name Name	ie:	entity or individual(s) doing Complete Address Dufur St, Nampa, ID 83686
3. The general type of business transacted und		
 ☐ Wholesale Trade ☐ Services ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 		Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: April Horn 704 Dufur St. Nampa, ED 83686		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above).	nt	Phone number (optional):
		Secretary of State use only
Signature (signature required) Printed Name: April Horri Capacity/Title: Øwn er	corpitorms labn forms labn. p65 Revised 04/2003	IDAHO SECRETARY OF STATE 96/15/2004 95:90 CK: 1000 CT: 150010 BH: 750490 1 0 25.00 = 25.00 ASSUM NAME # 2

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