FILED EFFECTIVE CERTIFICATE OF

ASSUMED BUSINESS NAME 2014 MAY -8 PM 3: 12

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

STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

The true name(s) and <u>business</u> address(e	s) of the entity or individual(s) doing
business under the assumed business na Name	me: Complete Address
Phyllis Lamken	1717 Proudfoot Lane, Box 586, Victor, ID
- 1,7	83455
The general type of business transacted to	under the assumed business name is:
	on and Public Utilities
☐ Wholesale Trade ☐ Construction	n ·
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Esta	e Name and \$25.00 fee to:
The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
Phyllis Lamken	PO Box 83720
P.O. Box 586	Boise ID 83720-0080 208 334-2301
1 1 1 1 1 AD 1 5 5	
Victor, ID 83455	
	ient
Name and address for this acknowledgm	ient

IDAHO SECRETARY OF STATE 05/08/2014 05:00

CK:1876334 CT:172099 BH:1423941 10 25.00 = 25.00 ASSUM NAME #2

171068

9/21/2012

Capacity/Title: ___

Capacity/Title: \(\sum \wc

Signature:

Printed Name: _____