



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2018 JUN 21 AM 00:00

SECRETARY OF STATE  
STATE OF IDAHO

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

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):

Heidi Villegas 497 Pheasant Dr. Orofino Idaho 83544

(Name) (Address)

Joe Villegas 497 Pheasant Dr. Orofino Idaho 83544

(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:

Heidi and Joe Villegas

(Name)

497 Pheasant Dr.

(Address)

Orofino, ID 83544

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Heidi Villegas

Signature: Heidi Villegas

Printed Name: Joe Villegas

Signature: Joe Villegas

Printed Name:

Signature:

Secretary of State use only

IDAO SECRETARY OF STATE

06/21/2018 05:00

CK:19366506 CT:172093 BH:1650044  
1@ 25.00 = 25.00 ASSUM NAME #2

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