

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

Filing fee: \$25.00.

## FILED EFFECTIVE

2017 FEB 10 AM 8: 33

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned use(s) in the transaction of business is:  Northwest Skyview  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):					
2						
	Shawn Goughnour 12976 W Prairie Ave			e, Post Falls, Idaho 83854		
	(Name)	(Address)				
	(Name)	(Address)				
	(Name)	(Address)	<u></u>			
	(Name)	(Address)	·			
3.	The general type of business transacted under the assumed business name is:					
	Retail Trade	Construction		Transportation and Public Utilities		
	Wholesale Trade	Agriculture		Mining		
	⊠ Services	Manufacturing		Finance, Insurance, and Real Estate		
4.	Mailing address for future	correspondence:		Name and address for this acknowledgment copy is (if other than #4):		
	Shawn Goughnour					
	(Name)			(Name)		
	12976 W Prairie Ave			(Address)		
	Post Falls, ID 83854			, ,		
	(City)	(State) (Zipcode)		(City) (State) (Zipcode)		
Printed Name: Shawn Goughnour				Secretary of State use only		
Sig	gnature: 52 Cy	2				
Printed Name:				IDAHO SECRETARY OF STATE 02/18/2017 05:00		
Signature:				CK:8001 CT:320692 BH:1568433 1@ 25.00 = 25.00 ASSUM NAME #2		
Pr	inted Name:			·		
Signature:				D192083		
		Rev. 08/2016	I			