

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2018 MAY -9 AM 6: 43

SECRETARY OF STATE

1.	The assumed business name which the undersig	- · · ·
	The Happy Hips	pies
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): Lora Bittinger Goodwin 1125 N wild Rose Ln / Post Falls, 1D 83854 (Name) (Address)	
	(Address)	
	(Name) (Address)	
	(Name) (Address)	
3.	The general type of business transacted under the assumed business name is:	
	Retail Trade	Mining
4.	Mailing address for future correspondence:	 Name and address for this acknowledgment COPY is (if other than # 4):
	Lora Bittinger Goodwin (Name) 1125 N wild Rose Ln	(Name)
	POST Fulls ID 8:3854	'Address
	(City) (State) (Zipoode)	(City) (State) (Zipcode)
Printed Name: Lora Bittinger Goodwin Signature dera bittinger Soodwin		Secretary of State use only
Sig	gnature Kera Kittinger Stordwin	
Printed Name:		IDAHO SECRETARY OF STATE 05/09/2018 05:00
Signature:		CK:5277 CT:357548 BH:1642858 16 25.00 = 25.00 ASSUM NAME #2
Pri	inted Name:	IG ED. OU - ED. OU MARON MANN. #Z
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