

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

12 JAN -4 PM 2:50

STATE OF IDAHO

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

|   | Investor Insigh     | nt   |
|---|---------------------|--|
| The true name(s) and <u>busines</u> business under the assumed business |                     | e entity or individual(s) doing                                |
| Name  | ousiness name.      | Complete Address   |
| The Office Staff, Inc.  | 5114 E              | Emerald Suite E Boise, Idaho 83706                             |
| (C114792)   |                     |  |
|   |                     |  |
| The general type of business t  | ransacted under th  | e assumed business name is:                                    |
|   | ransportation and F | •  |
| ☐ Wholesale Trade ☐ ○   | Construction        |  |
| ✓ Services ☐ A  | Agriculture         |  |
| ☐ Manufacturing ☐ M   | Mining              | Submit Certificate of Assumed Business                         |
| Finance, Insurance, and   | Real Estate         | Name and \$25.00 fee to:                                       |
| The name and address to whi   | ch future           | Secretary of State   |
| correspondence should be ad-  | dressed:            | 450 North 4th Street   |
| The Office Staff,Inc.   |                     | PO Box 83720<br>Boise ID 83720-0080                            |
| 5114 Emerald Suite E  |                     | 208 334-2301   |
| Boise,ID 83706  |                     |  |
| Name and address for this ack   | cnowledgment        | _  |
| COPY is (if other than # 4 above):                                      |                     | •  |
|   | <del></del>         |  |
|   |                     | Secretary of State use only                                    |
| Malalle Venu  | tomoso              | ,  |
| ature://///   |                     |  |
| ed Name: <u>Michelle, Kir</u>   | 195more             |  |
| acity/Title: PRESIDENT  | ·                   | IDANO SECRETARY OF STATE                                       |
| ature:  |                     | 91/94/2012 95:09   |
| ed Name:  |                     | CK: 5501 CT: 107214 BH: 138448<br>1 8 25.80 = 25.60 ASSUM MAME |