

Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

2017 DEC 28 AM 8: 36 SECRETARY OF STATE

1.	The assumed business name which the undersigned use(s) in the transaction of business is: Palouse Writers' Guild						
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):						
	Khaliela Wright	PO Box 52 Viola, ID 83872					
	(Name)	(Address)					
	(Name)	(Address)			 		
	(Name)	(Address)			 		
	(Name)	(Address)					
3.	The general type of business transacted under the assumed business name is:						
	☐ Retail Trade☐ Wholesale Trade☒ Services	Construction Agriculture Manufacturing	9	Minin	portation and Public ^l g ce, Insurance, and R		
4.	Mailing address for future	e correspondence:	5.	Name and accopy is (if other	ddress for this ackno	wledgment	
	Palouse Writers' Guild						
	(Name) PO Box 52			(Name)	· · ·		
	(Address)			(Address)			
	Viola, ID 83872			78.		· 	
	(City)	(State) (Zipcode)		(City)	(State)	(Zipcode)	
Printed Name: Khaliela Wright				Secretary of State use only			
Signature: .				IDAMO SECRETARY OF STATE			
Printed Name:				12/28/2017 05:00			
				CK:1900005886 CT:350297 BH:1618375 16 25.00 = 25.00 ASSUM NAME #2			
Si	gnature:			مساسم إساس	- un un amagen u har heet admitted had har har a	acin. qu'i que que qu'il qu'en 1 à girir	
Printed Name:					D109211		

Rev. 08/2015