

Signature:____

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

2017 SEP 15 PM 2: 08

SECRETARY OF STATE

1.	The assumed business name which the undersigned use(s) in the transaction of business is: The Glass House Property Management		
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):		
	Sunny Cope	916 N Cove Colony Way, Eagle, ID 83616	
	(Name)	(Address)	
2	The general time of husin	and transported condensity	ha assumed husiness name is:
J.			he assumed business name is:
	Retail Trade	Construction	Transportation and Public Utilities
		Agriculture	☐ Mining
	Services	Manufacturing	g X Finance, Insurance, and Real Estate
4.	Mailing address for future	correspondence;	5. Name and address for this acknowledgment copy is (if other than #4):
	Sunny Cope		Sunny Cope
			(Name)
	916 N Cove Colony Way	<u></u>	705 Mill St
	(Address) Eagle, ID 83616		(Address) Red Bluff, CA 96080
	(City)	(State) (Zipcode)	(City) (State) (Zipcode)
D.,;	Sunny Cone		
Printed Name: Sunny Cope			Secretary of State use only
Sig	gnature: <u>YWW W</u>	ne	
Printed Name: Signature: Printed Name:			IDAHO SECRETARY OF STATE
			09/15/2017 05:00 CK:2829 CT:345715 BH:1603132
			1@ 25.00 = 25.00 ASSUM NAME #2
			Dina.
Signature:			D197125

Rev. 08/2015