

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2017 APR 17 AM 11: 40

FILED EFFECTIVE

Filing fee: \$25.00.

SECRETARY OF STATE

0193775

1.	STATE OF IDAHO The assumed business name which the undersigned use(s) in the transaction of business is: Corner Plot Flowers			
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):			
	Molly Allen	1855 E Mortimer Dr. Boise, ID 83712		
	(Name)	(Address)		
	(Name)	:Address		
	(Name:	:Address:		
	(Name)	(Adaress)		
3.	The general type of business transacted under the assumed business name is:			
	☒ Retail Trade☐ Wholesale Trade☐ Services	☐ Construction☒ Agriculture☐ Manufacturing		Transportation and Public UtilitiesMiningFinance, Insurance, and Real Estate
4.	Mailing address for future correspondence: 5. Molly Allen		Name and address for this acknowledgment copy is (# other than # 4):	
	(Name)			(Name)
	1855 E Mortimer Dr			(Address)
	Boise, ID 83712	State: (7/popper		FORTY (State) (Zucode
Printed Name: Molly Allen				Secretary of State use only
Printed Name: Molly Allen Signature: Molly Allen Printed Name:				IDAHO SECRETARY OF STATE
Printed Name:				04/17/2017 05:00
Signature:				CK:1725 CT:338070 BH:1579481 10 25.00 = 25.00 ASSUM NAME #2
Printed Name:				

Rev. 08/2015

Signature: