

227

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned
submits for filing a certificate of Assumed Business Name.

2015 FEB 19 PM 2:29

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

New Hope Home Service

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Rossa S. Lame

1540 New Hope Loop Kenore, ID 83541

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Rossa S. Lame
1540 NEW HOPE LOOP
KENORE, ID 83541

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature: _____

Printed Name: Rossa S. Lame

Capacity/Title: Owner-operator

Signature: Rossa S. Lame

Printed Name: Rossa S. Lame

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

02/19/2015 05:00

CK: 2592282 CT: 172099 BH: 1462554

10 25.00 == 25.00 ASSUM NAME #2

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