

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

## FILED EFFECTIVE

2016 MAY 26 AM 9: 12

1.	The assumed business name which the undersigned use(s) in the Fant action of State ess is:  The Bottom Drawer  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):  Sarah Withey  435 Woodland RD Kamiah, ID 83536				
2.					
	(Name)	(Address)			
	(Name)	(Address)			<del></del>
	(Name)	(Address)			
	(Name)	(Address)	<u></u>		
3.	The general type of busin  Retail Trade  Wholesale Trade  Services	ess transacted under the Construction Agriculture Manufacturing	☐ Tran ☐ Mini	sportation and Public U	
4.	Mailing address for future	correspondence:	5. Name and copy is (if oth	address for this acknow ler than # 4):	vledgment
	Sarah Withey		(Name)		
	435 Woodland RD  (Address) Kamiah, ID 83536	<del>-,</del>	(Address)		
	(City)	(State) (Zipcode)	(City)	(State)	(Zipcode)
Pr	inted Name: Sarah Withey		Secretary of State use only		
Sig	gnature: 6000	2011			
Printed Name:			10AHO SECRETARY OF STATE 05/26/2016 05:00		
			1303 CT:158010 BH: 5.00 = 25.00 ASSUM	1530352	
	gnature:		7G 43	_	MAME TE
Pr	inted Name:			D186819	
Si	gnature:				