

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

2015 APR -7 AM 8: 42

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

SECRETARY OF STATE STATE OF BAHO

Please type or print legibly.

Instructions are included on back of application.	
The assumed business name which the un business is:	idersigned use(s) in the transaction of
Barrymore - Engkraf Bookkeep:	ing Services
2. The true name(s) and <u>business</u> address(es business under the assumed business nam <u>Name</u> Deborah Barrymore  Nikki Engkarf	
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	submit Certificate of Assumed Business
<ul> <li>The name and address to which future correspondence should be addressed:         Barrymore-Engkarf     </li> <li>Bookkeeping Services</li> <li>PO Box 4380 Hailey, ID 83333</li> </ul>	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):  Barrymore-Engkarf  Bookkeeping Services  PO Box 4380 Hailey, ID 83333	· · · · · · · · · · · · · · · · · · ·
Signature: Deborah Barrymore  Capacity/Title: Co-owner  Capacity/Title: Co-owner  Capacity/Title: Co-owner	IDAHO SECRETARY OF STATE  04/07/2015 05:00  CK:1131 CT:302639 BH:1469747  16 25:00 = 25:00 ASSUM NAME #3

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