



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 NOV -7 AM 8:47

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:

Infinity Insurance Services

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

Alisha Woodin

13800 N Three Forks Rd

Hauser ID 83854

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 type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input checked="" 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:

Alisha Woodin

13800 N Three Forks Rd.

Hauser ID 83854

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

Signature: Alisha Woodin

Printed Name: Alisha Woodin

Capacity/Title: Sole Proprietor

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

11/07/2014 05:00

CK:109 CT:303015 BH:1448613

10 25.00 = 25.00 ASSUM NAME #2

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