



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED

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

Please type or print legibly.
NOTE: See instructions on reverse before filing.

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

Kodiaks

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

Name

Laura L. Thornbrugh

Complete Address

5952 Main Hwy 95

Bonners Ferry, ID 83805

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

Retail Trade Transportation and Public Utilities
 Wholesale Trade Construction
 Services Agriculture
 Manufacturing Mining
 Finance, Insurance, and Real Estate

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

Kodiaks

6652 Alderson Ln

Bonners Ferry, ID 83805

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

(208)267-1891

Secretary of State use only

Signature:

(signature required)

Printed Name: Laura L. Thornbrugh

Capacity/Title: owner

(see instruction # 8 on back of form)