

CERTIFICATE OF ASSUMED BUSINESS NAME

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.

FILED EFFECTIVE 10 FEB 12 AM 8: 48

SECRETARY OF STATE STATE OF IDAHO

S. W. Muir Profess	sional Writing Solutions
The true name(s) and business address(es business under the assumed business named)	me:
Name	Complete Address
Shane Muir	2923 North Maple Grove Rd.
	Boise, ID 83704
	* 1
	n and Public Utilities
Wholesale Trade ☐ Construction Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Shane Muir 2159 E. Mozart Crt. Meridian, ID 83646	Submit Certificate of Assumed Business Name and \$25.00 fee to:
 Name and address for this acknowledgme COPy is (frother than # 4 above). 	ent
	Secretary of State use only
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nature: Though my	idento secretary of state
(elignature required)	Revised O4/2003
ted Name: Shane Muir	Bernaria de la companya de la compan
pacity/Title: Owner	IDANO SECRETARY OF STATE
(see instruction # 8 on back of form)	92/12/2019 95: