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CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2016 MAY 24 PM 2: 27

SECRETARY OF STATE STATE OF IDAHO

Title 30, Chaptor 21, Part 8, Idaho Code. Filing fee: \$25.00.

1.	The assumed business name which the undersigned use(s) in the transaction of business is: Snow Creek Cabinets					
2.	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):					
	John Tice	147 Split Rock Rd Bonner Ferry, ID 83805				
	(Nairio)	(Address)		 		
	(Name)	(Address)	.,,			
	(Nama)	(Addross)				
	(Nano)	(Address)				
3.	The general type of business transacted under the assumed business name is:					
	☐ Retail Trade☐ Wholesale Trade☐ Services	 ✓ Construction ✓ Agriculture ✓ Mining ✓ Manufacturing ✓ Finance, Insurance, and Real Estate 				
4.	Mailing address for future o	correspondence:	5.	Name and address copy is (# other than # 4)		wledgment
	Snow Creek Cabinets			John Tice		
	(Name) PO Box 3151			(Name) PO Box 3151		
	(Address)			(Address)		
	Bonners Ferry ID	83805		Bonners Ferry	1D	83805
	(City)	State) (Alpcode)		(City)	(State)	(Zipcode)
Pri	Printed Name: John Tice			Sucrutary of State use only		
Sig	gnature: John -	lu-				
Pri	inted Name					
Siç	gnature;			ማሻ ያሚሊማ ነጻ ልሎ.	05000001111111111111111111111111111111	wazar
Printed Name:				1DAHO SECRETARY OF STATE 05/24/2016 05:00		
Signature:				CK:3884510 CT:172099 BH:1530022 10 25.00 = 25.00 ASSUM NAME #2		
		Rev. 08/2015				

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