

Signature:___

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2016 JUL 13 AM 8: 57

1.	SECRETARY OF STATE The assumed business name which the undersigned use(s) in the transfer of least of the state of the sta							
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):							
	Tyler J. Noble	517 N .	517 N. Madison Avenue; Sandpoint, ID 83864					
	(Name)	(Address)	(Address)					
	(Name)	(Address)	(Address)					
	(Name)	(Address)	(Address)					
	(Name)	(Address)	(Address)					
3.	The general type of b Retail Trade Wholesale Trade Services	☐ C	cted under to onstruction griculture lanufacturin		Transportati	me is: on and Public U surance, and Re		
4.	Mailing address for fu	iture correspond	dence:		ne and address ' is (if other than #4	s for this acknov	vledgment	
	Ty Noble (Name)		·····	(Name	7			
	517 N. Madison Aver	nue		·	•			
	(Address) Sandpoint,	ID	83864	(Addre	ess)			
	(City)	(State)	(Zipcode)	(City)		(State)	(Zipcode)	
Pri	inted Name: Tyler J. N	oble			Secretar	y of State use only		
Się	Signature: <u>Chaffer Maller</u>				IDAHO SECRETARY OF STATE			
Pr	Printed Name:				07/13/2016 05:00 CK:1111 CT:326721 BH:1537320 1@ 25.00 = 25.00 ASSUM NAME #2			
Si	gnature:					LU.UU AAAUM	manne Mc	
Pr	Printed Name:				D187874			