

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE 2018 MAY -7 PM 12: 42

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

Filing fee: \$25.00.

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned use(s) in the transaction of business is:			
	Camas County Senior Citizen and Community Center			
	Carried County Corner Citiz	on and community of		<u></u>
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):			
				u listed in #1). ie, PO Box 217, Fairfield, ID 83327
	CAMAS COUNTY 129 West Willow Avenue (Signer) 129 West Willow Avenue (Signer)		ie, FO Box 217, Fairlield, ID 65327	
	(C 89814)_			
	(Name)	(Address)		
	(Name)	(Address)		
	(Name)	(Address)		
3.	The general type of husines	se transacted under the	3 2 6	sumed business name is:
J.	The general type of business transacted under the Retail Trade Construction		<i>-</i> as	
	Wholesale Trade	Construction Agriculture		
	X Services	Manufacturing		Finance, Insurance, and Real Estate
4.	Mailing address for future correspondence: 5.		5.	Name and address for this acknowledgment
	<b>3</b>			COPY is (if other than # 4):
	Sue Robbins			J. Will Varin
	(Name) 129 West Willow Avenue, PO Box 217			(Name) PO Box 1676
	(Address)	- O BOX 217		(Address)
	Fairfield, ID 83327			Boise, Idaho 83702
	(City) (S	tate) (Zipcode)		(City) (State) (Zipcode)
Printed Name: J. Will Narin Secretary of State use only				
				Secretary of State age only
Sig	gnature: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u> </u>		
Printed Name:				IDAHO SECRETARY OF STATE
Signature:				05/07/2018 05:00
				CK:2964 CT:321411 BH:1642270
Printed Name:				1@ 25.00 = 25.00 ASSUM NAME #2
Signature:				D202949

Rev. 08/2015