

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25,00.

FILED	EFFECTIVE
28/	FNOV IO

1.	The assumed business name which the undersigned use(s) in the transaction of business is:						
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 A. Winder	PO Box 2832, McCall, ID 83638  (Address)					
	(Name)						
	Patty I. Winder	PO Box 2832, McCall, ID 83638  (Address)					
	(Name)	(Address)	<del></del>				
	(Name)	(Address)					
<ul> <li>☐ Wholesale Trade</li> <li>☐ Agriculture</li> <li>☐ Mining</li> <li>☐ Services</li> <li>☐ Manufacturing</li> <li>☐ Finance, Inst</li> <li>4. Mailing address for future correspondence:</li> <li>5. Name and address</li> </ul>					sportation and Public tong nce, Insurance, and Re address for this acknow	eal Estate	
	John A. Winder			copy is (if other	er than # 4): 		
	(Name) PO Box 2832			(Name)			
	(Address)	<del></del>		(Address)		<del></del>	
	McCall	ID 83638					
	(City)	(State) (Zipcode)		(City)	(State)	(Zipcode)	
Printed Name: John A. Winder				Secretary of State use only			
Sig	mature: AW_	<u>4</u>					
Printeg Name: Patty I. Winder			1	IDAMO SECRETARY OF STATE 11/10/2016 05:00			
	gnature: Tally 1. W	kude			471 CT:158010 BH: 5.00 = 25.00 ASSU	:1554788	
	nted Name:					H =	
Sig	nature:				D19032	7	

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