



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2016 JUN 22 PM 3:26

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Pool AID

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):

Starite LLC

10539 W Merab Ct Star ID 83669

(Name)

(W168215)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

3. The general type of business transacted under the assumed business name is:

☐

Retail Trade

☐

Construction

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Mining

☒

Services

☐

Manufacturing

☐

Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Pool Aid

(Name)

10539 W Merab Ct

(Address)

Star ID 83669

(City)

(State)

(Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Jed Simpson

Signature:

[Signature]

Printed Name:

Signature:

Printed Name:

Signature:

Secretary of State use only

IDAHO SECRETARY OF STATE

06/22/2016 05:00

CK:3970600 CT:172099 BH:1534520

10 25.00 = 25.00 ASSUM NAME #4

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