

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

**FILED EFFECTIVE** 2013 NOV 13 AM 10: 43

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

## Please type or print legibly. instructions are included on back of application.

| The assumed business name which the ubusiness is:      At u D ubusiness.                                       | indersigned use(s) in the transaction of  |
|--|---|
| Neatly Put   |   |
| <ol><li>The true name(s) and <u>business</u> address(e business under the assumed business na</li></ol>        |   |
| <u>Name</u>  | Complete Address  |
| Allison Kearley  | 6524 W Denton St  |
|  | Boise, ID 83704   |
|  |   |
| 3. The general type of business transacted of Retail Trade Transportation Wholesale Trade Construction         | on and Public Utilities   |
| Z Services Agriculture   |   |
| ☐ Manufacturing ☐ Mining   | Submit Certificate of Assumed Business  |
| Finance, Insurance, and Real Estat   |   |
| 4. The name and address to which future correspondence should be addressed:  Allison Kearley  (524 W Denton St | Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| Boise, ID 83704  |   |
| 5. Name and address for this acknowledgme  | ent   |
| COPY is (if other than # 4 above):   |   |
|  | Secretary of State use only   |
| Signature:   |   |
| Printed Name: Allison Kearley  |   |
| Capacity/Title: \(\int\)wher \(\begin{array}{c}\)  |   |
| Signature:   |   |
| Printed Name:  | IDAHO SECRETARY OF STATE<br>11/13/2013 05:00  |
| Capacity/Title:  | CK: 1610052 CT: 172099 BH: 1397749<br>1 0 25.00 = 25.00 ASSUM NAME # 2                |

abn.pmd Rev. 07/2010

Capacity/Title: