

FILED EFFECTIVE

227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

2018 JUN -1 PM 1:05

SECRETARY OF STATE STATE OF IDAHO

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

PHD Insurance Brokers

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):

Mills Insurance Services Inc, 11022 Winners Circle, Los Alamitos, CA 90720

(Name) (Address)

C 210512

(Name) (Address)

(Name) (Address)

(Name) (Address)

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

- Retail Trade, Wholesale Trade, Services, Construction, Agriculture, Manufacturing, Transportation and Public Utilities, Mining, Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Ms. Trish Partin (Acrisure, LLC)

(Name)

5664 Prairie Creek Drive

(Address)

Caledonia MI 49316

(City) (State) (Zipcode)

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

Ruth E. Reickard

(Name)

P.O. Box 352

(Address)

Grand Rapids MI 49501-0352

(City) (State) (Zipcode)

Printed Name: Adam C. Reed

Signature: Adam C. Reed

Printed Name:

Signature:

Printed Name:

Signature:

Secretary of State use only

IDAHO SECRETARY OF STATE 06/01/2018 05:00

CK:19071314 CT:172099 BH:1646702 1@ 25.00 = 25.00 ASSUM NAME #2

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