

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

Signature:

2017 FEB 15 AM 9: 14

,g , <del>, _</del>	•		\$ •	SECRETARY NE	CTAT~
The assumed business nan	ne which the undersign	ed use(s)	in the transa	ction of busines	SIAIE <b>Sils</b> :
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1 a Dry wa	· · · · · · · · · · · · · · · · · · ·				<del></del>
2. The individual and/or entity	names and business a	ddress(es	s) of those do	ing business un	der
the assumed business nam		•	•		
Carl M. Richey	615 Goods	St.	Ant A	Blackfoot	IO
(Name)	(Address)	•		839	91
(Name)	(Åddress)				
(Name)	(Address)				
(Carrey)	( \======,				
(Name)	(Address)				<del></del>
3. The general type of busines	ss transacted under the	assumed	l business na	me is:	
Retail Trade	Construction		1		4! !4!
Wholesale Trade	Agriculture		i ransportati Mining	on and Public U	tilities
Services	Manufacturing	<u> </u>	_	surance, and Re	al Estata
Cervices	wandadaning		i i ilianoc, inc	didirec, and ite	ai Estate
4. Mailing address for future co	orrespondence:			s for this acknow	<i>i</i> ledgment
0 1 0 1		сору	IS (if other than # 4	):	
CarlARichea (Name) 615 lincoln St. A (Address)		(Name)			
/ 16 1: S	al A	(Name)			
(Address)	PT 71	(Addres	s)		
Blackfoot Is					
(City) (S	itate) (Zipcode)	(City)		(State)	(Zipcode)
_					
Printed Name: Carl M. Signature: M. My	Richey		Secretary	of State use only	
Signature: ASA. Mg	•		THELES.	**********	
Oignaturo.				SECRETARY OF STA 5/2017 05:0	
Printed Name:			CK:1049 CT	C:158010 BH:1	569058
Signature:				25.00 ASSUM	**
			، سب	192191	0
Printed Name:	***************************************		$\mathcal{O}$	1714	<i>y</i>

Rev. 08/2015