

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE 2017 HAY 31 AH 8: 39

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

Filing fee: \$25.00.

			SECHETARY STATE OF	OF STATE
1. The assumed business	name which the unders	signed use(s) ir	the transaction of busines	S IS:
DESERTSK	Y DESIGN			
2. The individual and/or er the assumed business  Heidi Plans	name (do not include the n	name you listed in	of those doing business un #1): ADY-TWin Fall	der 5 (d. 8 <i>33</i> 0
(Name)	(Address)			<u> </u>
(Name)	(Address)			
(Name)	(Address)			
(Name)	(Address)			
3. The general type of bus  Retail Trade  Wholesale Trade  Services	iness transacted under Construction Agriculture Manufacturi	n	ousiness name is: Fransportation and Public U Mining Finance, Insurance, and Re	
4. Mailing address for future Heid Pearson 218 Apple wo (Address) Twin Falls	on		and address for this acknow (if other than #4): (State)	vledgment (Zipcode)
Printed Name: Heids Signature: Heids	Lee Pearson		Secretary of State use only	
Printed Name:			TOTAL SECT. OF THE COMMENTS AND A SECTION OF THE SE	'm
Signature:			10AHO 3ECRETARY OI 05/31/2017 0	
Printed Name:			CK:1444 CT:340404 E 16 25.00 = 25.00 ASS	
Signature:			D194810	