

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

2015 AUG 19 PM 3: 12

SECRETARY OF STATE

1. The assumed business	name which the under	rsigned use(s) in	STATE the transaction	OF IDAHO of business i	is:	
Dan		undicat	L.			
	1 0	J				
2. The individual and/or enthe assumed business	name (do not include the		1):	usiness unde	er Q. 8370	
(Name)	(Address)		(City)	(State)	(Ziprode)	
(Name)	(Address)		(City)	(Stale)	(Zipcode)	
(Name)	(Address)		(ंवप्र)	(State)	(Z-pcode)	
·Name)	(Address)		(City)	(State)	(Zipcode)	
Services 4. Mailing address for future	∭ Manufactui ire correspondence:	5. Name ar	nance, Insuran nd address for t			
Emily Wilson (Name) 5620 S. Sat (Address) (BOISE) (City)	n ago DR LO 83709 (State) (Zipcode)	(Name) (Address) (City)		(State)	(Zipcode)	
Printed Name: Emily Wilson			Secretary of State use only			
Signature: Chuly	versa		IDAHO SECE	RETARY OF ST	እ ጥ ድ	
Printed Name:		08/19/2015 05:00 CK:3132670 CT:172099 BH:1488776				
Signature:			25.00 = 25			
Printed Name:			1 10	•		
Signature:			1) 186	0925		

Rev. 06/2015