

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

08 APR 22 PM 1:0

Please type or print legibly.

NOTE: See instructions on reverse before filing.

BRATHWAITE

(see instruction # 8 on back of form)

Printed Name: JOHN

Capacity/Title:

SECRETARY OF STATE STATE OF IDAHO

The true name(s) and business address(es) of the business under the assumed business name:	e entity or individual(s) doing
Name	Complete Address
JOHN BRATHWAITE	en e
331 SNOWYSIDE	
KETCHUM, ID. 83340	
 ☐ Retail Trade ☐ Wholesale Trade ☑ Services ☐ Manufacturing ☐ Transportation and ☐ Construction ☐ Agriculture ☐ Mining 	Public Utilities Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: TOHN BRATHWAITE P.O.BOX 4424 KETCHUM. 10. 83340	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
. Name and address for this acknowledgment copy is (if other than # 4 above).	Phone number (optional): 305 343 1455
$-\lambda I/A$	Secretary of State use only

IDAHO SECRETARY OF STATE

64/22/2008 65:00

CK: 11729195021 CT: 158010 BH: 1111324

1 25.00 = 25.00 ASSUM NAME # 2