



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2017 FEB -9 AM 9:43

SECRETARY OF STATE
STATE OF IDAHO

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

The Honey Hutch

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):

Karissa Palmer 216 S Ridgewood Dr, Post Falls, ID 83854

(Name) (Address)

Kaylah Palmer 216 S Ridgewood Dr, Post Falls, ID 83854

(Name) (Address)

(Name) (Address)

(Name) (Address)

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

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Construction | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Services | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

Palmer

(Name)

216 S Ridgewood Dr

(Address)

Post Falls ID 83854

(City) (State) (Zipcode)

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

same

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: Karissa Palmer

Signature: Karissa Palmer

Printed Name: Kaylah Palmer

Signature: Kaylah Palmer

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

02/09/2017 05:00

CK:6034 CT:334412 BH:1568169

10 25.00 = 25.00 ASSUM NAME #2

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