

Signature:____

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

	•	2017 UEL -4 AM 9: 46
1.	The assumed business name which the undersign	ed use(s) in the yare poperant poping as is: STATE OF IDAHO
o .	The individual and/or entity names and husiness a	ddrass(as) of those daing husiness under
۷.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1): Cassie Chartensen [Name] Tyles Christensen [Address] Twin Falls ID 83301	
	(Name) (Address)	
	(Name) (Address)	
3. The general type of business transacted under the assumed business name is:		assumed business name is:
	□ Retail Trade □ Construction □ Wholesale Trade ☑ Agriculture □ Services □ Manufacturing	☐ Transportation and Public Utilities☐ Mining☐ Finance, Insurance, and Real Estate
Mailing address for future correspondence:		
-	Tyler or Cassie Christensen (Name) 1102 Kenyon Rd (Address)	(Name) (Address)
	(City) Falls, ID \$3301 (Zipcode)	(City) (State) (Zipcode)
Prir	ited Name: Cassie Christinson	Secretary of State use only
Signature assu (hrtstensen		IDAHO SECRETARY OF STATE
Printed Name: Tyler Christensen		12/04/2017 05:00 CK:1136 CT:349181 BH:1614536
Signature: 19 25.00 = 25.00 ASSUM NAME #3		
Prin	ited Name:	D198744

Rev. 08/2015