

Signature:\_\_

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

2016 JUL 21 AM 9: 25

SECRETARY OF STATE

1.	The assumed business name which the undersigned use(s) in the transaction in the transact			
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):			
	Ashlee A King	1688 Kimberly Rd S	Ste 6	5, Twin Falls ID 83301
	(Name)	(Address)		
	(Name)	(Address)		
	(Name)	(Address)	<del></del>	
	(Name)	(Address)		
3.	The general type of business transacted under the assumed business name is:			
	<ul><li>☐ Retail Trade</li><li>☐ Wholesale Trade</li><li>☒ Services</li></ul>	<ul><li>Construction</li><li>Agriculture</li><li>Manufacturing</li></ul>		<ul><li>☐ Transportation and Public Utilities</li><li>☐ Mining</li><li>☐ Finance, Insurance, and Real Estate</li></ul>
4.	Mailing address for future	e correspondence:	5.	Name and address for this acknowledgment copy is (if other than # 4):
	Ashlee A King			
	(Name) 231 Red Rock Trail			(Name)
	(Address)			(Address)
	Kimberly ID 83341 (City)	(State) (Zipcode)		(City) (State) (Zipcode)
	(5.17)	(State) (Zipcode)		(City) (State) (Zipcode)
Pri	nted Name: Ashlee A King	9		Secretary of State use only
Sig	gnature: <u>Meleef</u> l	ies		
Printed Name:				IDAHO SECRETARY OF STATE 07/21/2016 05:00
Signature:				CK:246481 CT:302036 BH:1538569 16 25.00 = 25.00 ASSUM NAME #2
Pri	nted Name:			, m

Rev. 08/2015

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