

CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00. ZOI8 FEB 16 PM 2: 02

SECRETARY OF STATE

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

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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):

			· · · ·			
	Sarah Marshall 1220 Terry Dr, Idaho Falls, ID 83404					
(Name) (Address)				<u> </u>		
Daniel Miller 144 E 400 N, Blackfoot, ID 83221						
	(Name)	(Address)	· · · · · · · · · · · · · · · · · · ·	<u></u>		
	(Name)	(Address)	<u> </u>			
	(Name)	(Address)				
3.	The general type of business transacted under the assumed business name is:					
	Retail Trade			rtation and Public Utilities		
	Wholesale Trade	Agriculture	Mining			
	X Services	Manufacturing		, Insurance, and Real Estate		
	Sarah Marshall (Name) 1220 Terry Dr (Address) Idaho Falls, ID 83404 (City) (Si	tate) (Zipcode)	(Name) (Address) (City)	(State) (Zipcode)		
Printed Name: Sarah Marshall			Sec	Secretary of State use only		
Sig	nature:	Ull				
Pri	nted Name: Daniel Miller					
Signature: Carrielle				IDAHO SECRETARY OP STATE 02/16/2018 05:00		
Pri	nted Name:			CK# CT:345367 BH:162739 00 = 25.00 ASSUM NAME		
Signature:				D200470		
		Rev. 06/2015				