## FILED/EFFECTIVE

	CERTIFICATE OF ASSU (Please type or print legibly.	JMED BUSINESS NAME . See instructions on reverse.)	
	To the SECRETARY OF STATE, STA	daho Code, the undersigned 💝 🥏	02,FE3.21
1.	The assumed business name which the ubusiness is:	undersigned use(s) in the transactior ಲ್ಲ	ı of
	Teton Interiors	<u> </u>	<u> </u>
2.	The true name(s) and business address(d business under the assumed business na		3
	MICHAEL'SCOR" JOHUSON	Complete Address 1076 Westcliff DR. IDAHOFALLS	1D 8340Z
	JENNIFER MARIEJOHNSON	11	. !!
3.	The general type of business transacted (mark only those that apply)	under the assumed business name i	s:
	X       Retail Trade       ☐       Manufacturi         X       Wholesale Trade       ☐       Agriculture         X       Services       X       Construction	Finance, Insurance, and	
4. The name and address to which future Phone number (optional): 208.529.9501 correspondence should be addressed:			.9501
	SCOTT JOHNSON	Submit Certificate of Assumed Business	
	1076 WESTLLIFF DR.	Name and \$20.00 fee	e to:
_	IDAHO FALLS, ID 83402	Secretary of State 700 West Jefferson	
5.	Name and address for this acknowledgmecopy is (if other than # 4 above):	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
	:	Secretary of State use or	ıly
Printed	Name: MICHAGE Scott Johnson  ty: OWNER  (see instruction # 8 on back of form)	IDAHO SECRETARY  92/21/2002  CK: 2762 CT: 157611  1 @ 28.00 = 28.00  522\3	<b>95 : 00</b> BH: 447483 ASSUM NAME # 2