



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2016 MAY 10 AM 10:48

SECRETARY OF STATE
STATE OF IDAHO

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

TRI-COUNTY APPRAISAL

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):

HEATHER FAIRBANKS 541 MAIN AVE E, TWIN FALLS, ID

(Name) _____ (Address) _____

(Name) _____ (Address) _____

(Name) _____ (Address) _____

(Name) _____ (Address) _____

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

<input 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 checked="" type="checkbox"/> Services	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

HEATHER FAIRBANKS

(Name) _____

541 MAIN AVE E

(Address) _____

TWIN FALLS, ID 83301

(City) _____

(State) _____

(Zipcode) _____

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

(Name) _____

(Address) _____

(City) _____

(State) _____

(Zipcode) _____

Printed Name: HEATHER FAIRBANKS

Signature: Heather Fairbanks

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDaho SECRETARY OF STATE

05/10/2016 05:00

CK:CASH CT:324241 BH:1527908
1@ 25.00 = 25.00 ASSUM NAME #3

D186448