



## CERTIFICATE OF ASSUMED BUSINESS NAMED DEC - I AM 9: 01 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name, SECRETARY OF STATE Please type or print legibly. STATE OF ISAHO **CERTIFICATE OF**

NOTE: See instructions on reverse before filing.

Capital F	unding Solutions
The true name(s) and business address(business under the assumed business name  Name  Diana C. Jensen	ome: Complete Address 3527 S. Federal Way Suite 103, PMB 34
Kenneth N. Jensen	Boise, Idaho 83705 (Same as above)
Neimeth N. Jensen	(Same as above)
The general type of business transacted  Retail Trade  Transportat	under the assumed business name is: on and Public Utilities
Wholesale Trade ☐ Construction Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Esta  The name and address to which future correspondence should be addressed:  Capital Funding Solutions  3527 S. Federal Way Suite 103, PMB 34  Boise, Idaho 83705  Name and address for this acknowledg copy is (if other than # 4 above).	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
nature:  (signature required)  Atted Name:  Kenneth N. Jensen  Dacity/Title:  Partner	- God Lipsell Control of State

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