CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly. Instructions are included on back of application.

FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

			10 m
1.	The assumed business name which the unbusiness is:		
	North Idaho flow	una	Pump Repair
2.	The true name(s) and <u>business</u> address(est business under the assumed business name Name Name Name Kuy Lugh Miller	es) of the entity or individual(s) doing	
3.	The general type of business transacted ur	nder the a	ssumed business name is:
0.	Retail Trade Transportation Wholesale Trade Construction Services Agriculture		
	☐ Manufacturing ☐ Mining		Assumed Business
	☐ Finance, Insurance, and Real Estate		Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: Kayleigh Miller PD Box 187 Porderay TO 83852	η,	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5 .	Name and address for this acknowledgment copy is (if other than # 4 above):	nt	
			Department of Otate was as by
Ola	Longilla	\	Secretary of State use only
Signa	1 2 2 2 414		
_	ed Name: D. Miller		
	city/Title: +Curtner		IDAHO SECRETARY OF STATE 10/27/2011 05:00
Signa	there such haffer hul		CK: 10// CY: 26.3665 8H: 1295/95 1 9 25.80 = 25.80 ASSUM MANE # 2
	ed Name: Myleigh Miller		*
Capa	city/Title: Partner	}	D151010