



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

**FILED EFFECTIVE**  
2017 FEB 27 AM 10:17  
SECRETARY OF STATE  
STATE OF IDAHO

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

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):

Thomas Stenkamp                      1203 Falcon St Caldwell ID 83607  
(Name)    (Address)

\_\_\_\_\_  
(Name)    (Address)

\_\_\_\_\_  
(Name)    (Address)

\_\_\_\_\_  
(Name)    (Address)

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

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

4. Mailing address for future correspondence:

Thomas Stenkamp  
(Name)  
1203 Falcon St  
(Address)  
Caldwell                      ID                      83607  
(City)    (State)                      (Zipcode)

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

\_\_\_\_\_  
(Name)  
\_\_\_\_\_  
(Address)  
\_\_\_\_\_  
(City)    (State)                      (Zipcode)

Printed Name: Thomas Stenkamp

Signature:

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
02/27/2017 05:00  
CK:152 CT:335111 BH:1570726  
1@ 25.00 = 25.00 ASSUM NAME #2

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