

CERTIFICATE OF ASSUMED BUSINESS NAME

2016 MAR 14 AM 9: 20

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

Printed Name:

Signature:

SECRETARY OF STATE

1.	STATE OF IDAHO The assumed business name which the undersigned use(s) in the transaction of business is:		
	CATALYST CONSI	ULTING SOLUTIO	NS
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):		
	Carly Williams	P.O. BOX 313 +	layden 10 83835
	(Name)	(Address)	
	(Name)	(Address)	
	(Name)	(Address)	
3.	The general type of business transacted under the assumed business name is:		
	☐ Retail Trade☐ Wholesale Trade☒ Services	ConstructionAgricultureManufacturing	Transportation and Public UtilitiesMiningFinance, Insurance, and Real Estate
4.	Mailing address for future	correspondence: 5	 Name and address for this acknowledgment copy is (if other than #4):
	CATALYST LONGULTING (Name) P.O. Box 313	LA SOLUTIONS	(Náme)
	(Address) Hayden (City)	(State) (Zipcode)	(Address) (City) (State) (Zipcode)
Pr	inted Name: CARLY	NILLIAMS	Secretary of State use only
Signature: July			IDAHO SECRETARY OF STATE 03/15/2016 05:00
Printed Name:			CR:17375250145 CT:158010 BH:1518658 18 25.00 = 25.00 ASSUM NAME #2
Şi	gnature:		·

Rev. 08/2015

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