## **CERTIFICATE OF ASSUMED BUSINESS NAME**

**FILED EFFECTIVE** 

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

2015 JUL 13 AM 9: 41

1.	SECRETARY OF STATE The assumed business name which the undersigned use(s) in the transaction of business is:			
	TrackMy.c	com		<u></u>
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):			
	Jack Evans			_
	5140 E Inverness Dr	Post Falls	ID 83854	<del>: -</del>
				_
				_
	<del></del>			<del></del>
3.	The general type of business transacted under the  ☐ Retail Trade ☐ Construction ☐ Wholesale Trade ☐ Agriculture ☐ Manufacturing	☐ Transport	name is: ation and Public Util Insurance, and Real	
4.	Mailing address for future correspondence:	<ol><li>Name and address copy is (if other than</li></ol>		edgment
Ja	ack Evans	. 11		
5	140 E Inverness Dr			
<u>P</u>	Post Falls ID 83854		<del></del>	<del>- •</del> ,
Pr	inted Name: Jack Evans	Secre	tary of State use only	
Signature: Signature:		IDANO SECRETARY OF STATE 07/13/2015 05:00 CK:1112 CT:214805 BH:1483557		
	gnature:inted Name:	16 25.	00 = 25.00 ASSU	IM NAME #:

Rev. 07/2015

Signature:

1)180230