

Signature:

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.



SECRETARY OF

1 mily iee. \$25.00.		STATE OF STATE
1. The assumed business name which t	-	e(s) in the transaction of bursingss is:
2. The individual and/or entity names and the assumed business name (do not in [Address] (Address)	clude the name you lis	· · · ·
(Name) (Address)  (Name) (Address)  (Name) (Address)		
Wholesale Trade Ag	ted under the assur Instruction riculture Inufacturing	med business name is:  Transportation and Public Utilities  Mining Finance, Insurance, and Real Estate
4. Mailing address for future correspond  (Name)  1221 E. Ash St  (Address)  Caldwell Id (State)	(Na	ame and address for this acknowledgment opy is (if other than # 4):  ame)  ddress)  ty) (State) (Zipcode)
Printed Name: Nicorol Clift Signature: MCGrol Clift Printed Name: Signature:	<u> </u>	Secretary of State use only  IDAHO SECRETARY OF STATE  12/07/2016 05:00  CK:1650 CT:332021 BH:1558440  16 25.00 = 25.00 ASSUM NAME #2
Printed Name:		D190803

Rev. 08/2015