## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHOMAR 15. 64 9: 04



The assumed business name which the under business is:	
Action Billing Se	ruce
2. The true name(s) and business address(es) business under the assumed business name  Name  LORINDA NEWTON	
The general type of business transacted und (mark only those that apply)	ler the assumed business name is:
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	☐ Transportation and Public Utilities ☐ Finance, Insurance, and Real Estate ☐ Mining
The name and address to which future Photography Correspondence should be addressed:	one number (optional): $362 - 4192$
4. The name and address to which future correspondence should be addressed:  LORINDA Newton  Action Billing Service	Mining  Bus. 3(2-6278 Bus Fay 36) - 602  one number (optional):  Submit Certificate of  Assumed Business  Name and \$20.00 fee to:
LORINDA NEWTON	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson
LORINDA Newton  Action Billing Service  10543 Ogden, Bise, ID. 83709  5. Name and address for this acknowledgment	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
LORINDA Newton  Action Billing Service  10543 Ogden, Bill, ID. 83709  5. Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
LORINDA Newton  Action Billing Service  10543 Ogdan, Bill, ID. 83709  5. Name and address for this acknowledgment copy is (if other than #4 above):	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
LORINDA Newton  Action Billing Service  10543 Ogden, Billing Service  10543 Ogden, Billing Service  10543 Ogden, Billing Service  5. Name and address for this acknowledgment copy is (if other than # 4 above):  Signature: Hounda Newton	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301  ISANO DECRETARING OF AND CK: 1286 CT: 112584 BH: 196848

(see instruction # 8 on back of form)