

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2014 OCT -9 AM 8: 52

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

| 2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: | |
|--|-------------------------------------|
| <u>Name</u> | Complete Address |
| DOROTHY F. HEINEY | 1907 W. FIRMINION AVE#101 |
| | NAMPA 10 83651 |
| | |
| 3. The general type of business transacted u | |
| | on and Public Utilities |
| ☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture | 1 |
| ☐ Services☐ Agriculture☐ Mining | Submit Certificate of |
| | Assumed Business |
| ☐ Finance, Insurance, and Real Estate | e Name and \$25.00 fee to: |
| 4. The name and address to which future | Secretary of State |
| correspondence should be addressed: | 450 North 4th Street |
| D. C. F. HEINEN DRIGINALS | PO Box 83720 Boise ID 83720-0080 |
| 1907 W. FLAMINGO AVE # 101 | 208 334-2301 |
| NAMPA 1D.83651 | |
| 5. Name and address for this acknowledgme | ent |
| COPY IS (if other than # 4 above): | |
| DOIDSTRY FIREINEY | |
| 1907 W FLAMINGO AVE +161 | |
| MAMPA 10. 83656 | Secretary of State use only |
| | |
| ignature: Dantha + Hunus | |
| | IDAHO SECRETARY OF STAT |
| rinted Name: Doubres Fr HEINEY | 10/09/2014 05:00 |
| Signature: <u>Nauthy</u> + <u>Henry</u> Printed Name: <u>Doubrey</u> Fr. Henry Capacity/Title: <u>Ourser</u> Signature: <u>Nauthy</u> + Neuron | |

1)174199

Capacity/Title: <u>OWNER</u>