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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bu Please type or print legibly. Instructions are included on back of app	NAME FILED EFFECTIVE e undersigned 2015 JUN 19 AM 8: 39 usiness Name. SECRETARY OF STATE
 The assumed business name which the undersigned use(s) in the transaction of business is: Advantage Tools 	
2. The true name(s) and <u>business</u> address(es) business under the assumed business nam <u>Name</u> Kathleen Tripp	
 3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 	nder the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
 The name and address to which future correspondence should be addressed: Advantage Tools 436 Hampton Ave Chubbuck, Id 83202 	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	nt
Signature: <u>Kathleen Jupp</u> Printed Name: Kathleen Tripp	Secretary of State use only IDAHO SECRETARY OF STATE
Capacity/Title: <u>^{owner}</u> Signature:	06/19/2015 05:00 CK:381 CT:311538 BH:1480575 1@ 25.00 = 25.00 ASSUM NAME #
Printed Name: Capacity/Title:	D179829

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