

Signature:___

CERTIFICATE OF ASSUMED BUSINESS NAME

2015 JUL 13 AM 9:55

FILED EFFECTIVE

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

SECHCIARY OF STATE

The assumed business name which the undersign	ned use(s) in the trans	saction of business is:
Ethridge Squa	` ,	
2. The individual and/or entity names and business a the assumed business name (do not include the name Ethridge Square Homeowners Association, INC	e you listed in #1):	loing business under
(Name) P.O. Box 2654 (Aduress)	Eagle	ID 83616 (State) (Zipcode)
(Name)		(Julius)
(Address)	(City)	(State) (Zipcode)
(Name)		
(Address)	(City)	(State) (Zipcode)
. Mailing address for future correspondence:	5. Name and addre	ess for this acknowledgmen # 4):
Ethridge Square HOA	(Name)	
P.O. Box 2654 Address)	(Address)	
Eagle ID 83616 (Crity) (State) (Zipcode)	(City)	(State) (Zipcode)
Printed Name: Ryan Martin	Secret	ary of State use only
Signature:	1	HO SECRETARY OF STATE /13/2015 05:00
Printed Name:Signature:	CK:1077 CT:312357 BH:148370: 16 25.00 = 25.00 ASSUM NAME	
Printed Name:		
Signature:		

Rev. 07/2015