

Printed Name:

Signature: \_\_\_\_

Printed Name:

Signature:\_\_\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2017 OCT -4 AH 9: 04

Filing fee: \$25.00. SECRETARY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is DAHO KELLS LIL THRIFT SHOP 2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1): KELLEY GIDDINGS 2725 W. GELTICE POST FACES ID (Name) (Address) (Name) (Address) (Name) (Address) 3. The general type of business transacted under the assumed business name is: X Retail Trade Construction Transportation and Public Utilities Wholesale Trade Agriculture Minina Services Manufacturing Finance, Insurance, and Real Estate Mailing address for future correspondence: 5. Name and address for this acknowledgment CODY IS (if other than # 4): KELLEY GIDDINGS (Name) 1775 W. GELTICE

(Address)

1097 FALLS ID 89854

(City) (State) (Zipcode) (Address) (City) (State) (Zipcode) Printed Name: KELLEY KIIPTINGS Secretary of State use only

10/04/2017 05:00

CK:24507503627 CT:158010 BH:1605771 10 25:00 = 25:00 ASSUM NAME #2

D 197505

Rev. 08/2015