

Signature:\_\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2018 APR 16 AM 11 32

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

SECRETARY OF STATE

1.	The assumed business na NorthStar Custom Design	_	ned	use(s) in	the transaction of	STATE 0 busines:	Y OF STATE F IDAHO
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):  Daniel Andrade 3517 E. 2nd Ave. Apt. #41 Post Falls, ID 83854						
	<sup>(Name)</sup> Felicia Kolb	(Address) 3517 E. 2nd Ave. Apt. #41 Post Falls, ID 83854					
	(Name)	(Address)					
	(Name)	(Address)					
	(Name)	(Address)					
3.	The general type of business transacted under the assumed business name is:						
	<ul><li>⋉ Retail Trade</li><li> Wholesale Trade</li><li> Services</li></ul>	<ul><li>☐ Construction</li><li>☐ Agriculture</li><li>☐ Manufacturing</li></ul>			ransportation and Mining Finance, Insurance		
4.	Mailing address for future correspondence:  5. Name and address for this acknowledgment copy is (if other than # 4):						
	NorthStar Custom Designs				,		
	(Name) (Name) 3517 E. 2nd Ave. Apt. #41						
	(Address) Post Falls, ID 83854		(Address)				
	(City)	State) (Zipcode)		(City)	<del> </del>	(State)	(Zipcode)
Printed Name: Daniel Andrade				Secretary of State use only			
Signature: and Chre				IDAHO SECRETARY OF STATE			
Printed Name: Felicia Kolb				04/17/2018 05:00 CK:618 CT:356385 BH:1638643			
Siç	gnature: Jelik				25.00 = 25.00		
Printed Name:				N201980			