CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO OF ICT 18 Pil 2- 00

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.	
1. The assumed business name which the unbusiness is: Heersink Law OFF	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address	
Phillip B. Heersink	New Phymouth, ID 83655
The general type of business transacted under the assumed business name is: (mark only those that apply)	
☐ Retail Trade ☐ Manufacturin ☐ Wholesale Trade ☐ Agriculture ☒ Services ☐ Construction	Finance, Insurance, and Real Estate
4. The name and address to which future correspondence should be addressed:	
Heersink haw Offices 2820 HWY 30 West	Submit Certificate of Assumed Business Name and \$20.00 fee to:
New Ply mouth, ID 83655 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Sand Selection of State use only
gnature: Phillip B. Heersink	16/18/1999 69:66 CK: 2518 CT: 121879 BH: 258881 1 2 28.08 = 28.88 ASSUM NAME # 2

Sig

Printed Name: Phillip B. Heersink

Capacity: Sole Proprietor

(see instruction # 8 on back of form)

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