

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

09 DEC 22 AM 8:58

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

Sp	a Clean		
The true name(s) and business address(e business under the assumed business name Name Michael Turner	me:	ntity or individual(s) doing Complete Address / Fairview Ave, Suite A, Boise ID 83	3704
Amarda Turner	Same		
The general type of business transacted u			r
 Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 		Submit Certificate of Assumed Business Name and \$25.00 fee to:	ੱ
The name and address to which future correspondence should be addressed: Michael Turner		Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080	
7978 W Fairview Ave, Suite A Boise, ID 83704		(208) 334-2301	
Name and address for this acknowledgm copy is (if other than #4 above):	ent		
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