FILED SFFECTIVE



## CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 OCT -3 AM 8:31 SECRETARY OF STATE STATE OF JOAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

	Elizabeth Pearl		
The true name(s) and busines business under the assumed I Name	ousiness name:	entity or individual(s) doing Complete Address 2600 Avalon St. Nampa, Idaho 8	
3. The general type of business t	ransacted under the	assumed business name i	s:
☐ Wholesale Trade ☐ G☐ Services ☐ G☐	ch future dressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301	<b>):</b>
5. Name and address for this accopy is (if other than # 4 above):	knowledgment		and the second s
		Secretary of State use	only
nature: <u>Muluy Car</u> (signature required) nted Name: <u>Michelle E. Dea</u>	G'Acorpyforms/Labn forms/labn.p85	IDAHO SECRE	TARY OF STATE

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