

Signature /

Printed Name:

Signature:

Signature:

Printed Name:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

 The assumed business name which the undersigned use(s) in the traff. **BLAKE DOLAN HOFFMAN 19-638370** 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): Blake Dolan Hoffman 11714 W Pinewood River Lane Star, Idaho 83669 (Name) (Name) (Address) (Name) (Address) (Name) (Address) 3. The general type of business transacted under the assumed business name is: Retail Trade Construction Transportation and Public Utilities Agriculture Wholesale Trade Mining Manufacturing Kinance, Insurance, and Real Estate Services 4. Mailing address for future correspondence: 5. Name and address for this acknowledgment CODY IS (if other than #4). Blake Dolan Hoffman (Name) (Name) 11714 W Pinewood River Lane (Address) (Address) Star, Idaho 83669 (City) (State) (Zipcode) (City) (State) (Zipcode) Printed Name: BLAKE Dolan Hoffman Secretary of State use only

IDAHO SECRETARY OF STATE

04/26/2016 05:00

CK:206619692004 CT:158010 BH:1525391 $16\ 25.00 = 25.00\ \text{ASSUM NAME } 42$

186123