



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2016 MAR -3 AM 9:33
SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Northwest Food Safety Professionals

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):

Jamie Smith

1206 South 19 Th. St. Nampa ID 83686

(Name)

(Address)

Garry Siggelkow

16836 Portsmouth Lane Nampa ID 83687

(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

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Jamie Smith

(Name)

1206 South 19 Th. Street

(Address)

Nampa ID 83686

(City)

(State)

(Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Jamie Smith

Signature: [Signature]

Printed Name: Garry Siggelkow

Signature: [Signature]

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

03/03/2016 05:00

CK:1080 CT:321181 BH:1516497

1@ 25.00 = 25.00 ASSUM NAME #2

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