

Printed Name:

Printed Name:

Signature:

Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

APPOLINA S. LARSE

2015 HOY -6 AM 11: 04 SEGRETARY OF STATE STATE OF IDAHO

- 1. The assumed business name which the undersigned use(s) in the transaction of business is: Brise OPPORTE HOUSING
- 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);

	CAL ENTERAPHISES	Address)	LINCERAVE. BUISE, FO \$3713
	(W157873)	(Address)	
	(Name)	(Address)	
	(Name)	(Addr∋ss)	
З.	The general type of business transacted under the assumed business name is:		
	 Retail Trade Wholesale Trade Services 	 Construction Agriculture Manufacturing 	 Transportation and Public Utilities Mining Finance, Insurance, and Real Estate
4.	Mailing address for future co Divid C. UKSEN		 Name and address for this acknowledgment copy is (if other than # 4).
	Name) (Name) 4758 N. LANKER AVE.		(Name)
	(Address) <u>ROISE</u> (City) (Sta	2 83713 ate) (Zipcode)	(Address) (City) (State) (Zipcode)
			Secretary of State use only

IDAHO SECRETARY OF STATE 11/06/2015 05:00 CK:1335 CT:300025 BH:1499470 10 25.00 = 25.00 ASSUM NAME #2

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