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CERTIFICATE OF ASSUMED BUSINESS NAME

2015 JUL 30 AM 10: 30

STATE OF IDAHO

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

1.	The assumed business r		gned use(s) in the	transaction	n of business	is:
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1);					
	JEROMY L. HART	PO BOX 624 (Address)	IONA		83427	
	MOLLY J. HART	PO BOX 624	TONA	(O(y)	(State)	(Alpcode)
	(Name)	(Address)	IONA	(City)	83427 (State)	(Zipcode)
	COURTNEY KIM HART	PO BOX 68	IONA	n	83427	(C)rtode)
	(Name)	(Address)		(City)	(State)	(Zipcode)
	(Name)	(Address)		(City)	(State)	(Zipcode)
3.	The general type of busin	ess transacted under ti	ne as sumed busin	ess name i	s:	
	Retail Trade	Construction	Trans	sportation a	nd Public Utili	ties
	Wholesale Trade	Agriculture	Minii Minii			1100
	☐ Services	Manufacturing	😿 Finar	ice, Insuran	ce, and Real	Estate
JE (Nam	BOX 624		5. Name and a copy is (frothe JEROMY L. B. (Name) PO BOX 624	r than # 4):	nis acknowled	igment
IO	NA.	ID 83427	(Address)		TD 9340	
(City		(State) (Zipcode)	(City)		ID 83427 (State)	(Zipcode)
Printed Name: JERONY L. HART Signature:			Secretary of State use only			
Prin	ted Name:					
Signature:					CRETARY OF S	
Printed Name:			07/30/2015 05:00 CK:3073026 CT:172099 BH:1486033 10 25:00 = 25:00 ASSUM NAME #2			
Sign	ature:		7.6	£\$.08 - ≥	.J.UU <u>A</u> 55U1	4 DAMAN #Z
		Rev. 08/2015	1	100		
				1805	560	