

CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 APR 18 AM 8:55

SECHT BY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

In-Ex/ter	iors
The true name(s) and <u>business</u> address(es) or business under the assumed business name: <u>Name</u> Carrie L Ridgwell 13	f the entity or individual(s) doing <u>Complete Address</u> 19 Main Street Sandpoint, ID 83864
3. The general type of business transacted unde Retail Trade Transportation ar Wholesale Trade Construction	
✓ Services	Submit Certificate of Assumed Business Name and \$25.00 fee to:
I. The name and address to which future correspondence should be addressed: Carrie L Ridgwell	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
1319 Main Street Sandpoint, ID 83864	208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
nature William Define	Secretary of State use only
ted Name. Carrie L Ridgwell	
pacity/Title: Sole Proprietor	
nature:	IDAHO SECRETARY OF STATE 04/18/2011 05:0
nted Name:	CK: 501 CT: 158010 BH: 1269

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