



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2015 DEC -8 AM 11:46

SECRETARY OF STATE
STATE OF IDAHO

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

Mahoney CPAs

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):

Michael J. Mahoney, CPA, PLLC, 2552 W Tenuta Ct, Meridian, Idaho 83646 (W149883)
(Name) (Address)

Michael J. Mahoney, CPA, 2552 W Tenuta Ct, Meridian, Idaho 83646
(Name) (Address)

(Name) (Address)

(Name) (Address)

3. The general type of business transacted under the assumed business name is:

- | | | |
|--|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Construction | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

Michael J. Mahoney, CPA, PLLC
(Name)

2552 W. Tenuta Ct.
(Address)

Meridian ID 83646
(City) (State) (Zipcode)

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

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: Michael J. Mahoney, CPA

Signature: *Mike J. Mahoney*

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
12/08/2015 05:00

CK:4548 CT:308432 BH:1503466
1@ 25.00 = 25.00 ASSUM NAME #2

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