27	
CERTIFICATE OF	EILED FFFFCTIVE
ASSUMED BUSINESS N	
Pursuant to Section 53-504 Idebo Code the unit	AN R: 17
submits for filing a certificate of Assumed Busine Please type or print legibly.	SS Name.
NOTE: See Instructions on reverse before fili	ng. STATE OF IDAHO
 The assumed business name which the undersignation business is: 	ned use(s) in the transaction of
RDH Insurance S	ervices
The true name(s) and business address(es) of the business under the assumed business name:	e entity or individual(s) doing
RDH Enterprises LLC	Complete Address
	870 W Colchester Dr. Eagle, ID 83616
(W 70857)	
3. The general type of business transacted under th	
 Retail Trade ☐ Transportation and F Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ✓ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: <u>Ronald P Harrell</u> <u>PO Box 140217</u> <u>Garden City, ID 89942 83714_0217</u> 5. Name and address for this acknowledgment copy is (if other than #4 above): 	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
	Secretary of State use only
gnature:	
apacity/Title: Member	and a second
(see Instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 04/04/2008 05:00 CK: 8174 CT: 222013 BH: 110837 1 0 25.08 = 25.00 Assum Name
	D 120593
