



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE
2017 MAR -9 PM 3:18
SECRETARY OF STATE
STATE OF IDAHO

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

Heart and Dagger Tattoo

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):

Samuel Jones
(Name)

426 main ave S, Twin falls
(Address)

ID 83301

(Name) (Address)

(Name) (Address)

(Name) (Address)

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

Retail Trade

Construction

Transportation and Public Utilities

Wholesale Trade

Agriculture

Mining

Services

Manufacturing

Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Samuel Jones
(Name)

426 main Ave S.
(Address)

Twin falls Id 83301
(City) (State) (Zipcode)

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

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: Samuel Jones

Secretary of State use only

Signature: [Signature]

IDAHO SECRETARY OF STATE

03/09/2017 05:00

CK:CASH CT:158010 BH:1572856
1@ 25.00 = 25.00 ASSUM NAME #2

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____