

Signature:

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

Filing fee: \$25.00.

## FILED EFFECTIVE

2015 JUL 21 AM 8: 45

	•		SECRETARY OF AT	A Tripp	
1.	The assumed business name which the undersign	ed use(s)	SECRETARY OF ST. in the transaction of busines	AIL Bs is:	
	Ollies Treat Truck				
2.	The individual and/or entity names and business a the assumed business name (do not include the name		-	nder	
	Deneil Lavonne Boi	10N			
	(Nation)	<u> </u>	Th di	2:017	
	18140 Dean Lave, Na	11 pa	(State) (Zi	565 /	
		· —————			
	(Nanie)				
	(Address)	(City)	(State) (Z	ipcode,	
	(Name)	<del> ,</del> -		<del></del>	
	(Addréss	(City)	(State) // /////////////////////////////////	ipcode)	
2	The general type of business transacted under the	•			
J.		assume:	- -	E 44****	
	Retail Trade Construction  Wholesale Trade Agriculture	<u></u>	Transportation and Public Mining	Utilities	
	Services Manufacturing		Finance, Insurance, and R	leal Estate	
4	Mailing address for future correspondence:	5 Nam	e and address for this ackno	wledament	
7.	·		is (if other than #4):	Wicaginone	
	Deneil Bower	<del></del>	<del></del>		
1743	18140 Deun Lane.	:Name)			
,A,d	drase:	(Address)	<del></del>		
:0	Nampa 1 10. (State) (Ziucode)	(City)	(State)	(Z pcode)	
Pri	inted Name: De Wes L. Bower		Secretary of State use only		
Signature: Meil L. Bours			IDAHO SECRETARY OF STATE		
	inted Name:	ļ	07/21/2015 05 CK:5024 CT:158010 BH	:1484708	
			16 25.00 = 25.00 ASSU	M NAME #2	
	gnature:				
Pri	nted Name:		D180412.		