FILED EFFECTIVE



Printed Name: Stephen H Crawley

Printed Name:

Signature:

Signature:

Signature:___

Printed Name:

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2018 JUN -4 AM 9: 50

SECRETARY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is: Straight Arrow Drug Testing 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): Stephen H Crawley 245 10th st Plummer ID 83851 (Name) (Address) (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 X Services Manufacturing Finance, Insurance, and Real Estate Mailing address for future correspondence: 5. Name and address for this acknowledgment CODY is (if other than # 4): Straight Arrow Drug Testing (Name) PO Box 261 Plummer, ID, 83851 (Address) (Address) (City) (State) (Zipcode) (City) (State) (Zipcode)

Secretary of State use only

1DAHO SECRETARY OF STATE 06/04/2018 05:00

CK:100156 CT:358726 BH:1647109 16 25.00 = 25.00 ASSUM NAME #2

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Rev. 08/2015