

CERTIFICATE OF ASSUMED BUSINESS NAME

2015 FEB 17 AM 9: 40

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.
Instructions are included on back of application.

The assumed business representation Teton Hokulia	name which the und	dersigned	use(s) in the transaction of	
2. The true name(s) and <u>business</u> under the assu <u>Name</u> WJJ Investments LLC	med business nam	ie:	ntity or individual(s) doing <u>Complete Address</u> 92, Victor, ID 83455	
3. The general type of busing Retail Trade Wholesale Trade Services Manufacturing	ness transacted und Transportation Construction Agriculture Mining		Submit Certificate of	
Finance, Insurance 4. The name and address to correspondence should International Teton Hokulia Po Box 1092, Victor, ID 8345	e, and Real Estate to which future be addressed:		Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and address for the copy is (if other than # 4 above).	nis acknowledgmen	. t		
Signature:			Secretary of State use only	
Printed Name: Jessica Fritsch Capacity/Title: Partner Signature:			IDAHO SECRETARY OF STATE 02/17/2015 05:00 CK:2583988 CT:172099 BH:146218; 16 25:00 = 25:00 ASSUM NAME #3	
Printed Name: Capacity/Title:			D176844	•

abruprno Rev. 07/2010