

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

12 MAR 12 PM 4:50

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

STATE OF IDAHO

| | | * | |
|---------------|---|---|--|
| 1. | The assumed business name which the und | dersigned use(s) in the transaction of | |
| | business is: | | |
| | Then My Ky | ୯. ५ | |
| | | | |
| 2. | The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: | | |
| | | | |
| | <u>Name</u> | Complete Address | |
| | Llord Rock Freplaces Stone | L. T. | |
| • | (CUDTIG) | 4081 W. Clinder Blud. | |
| | <u> </u> | 100 100 CANDEL NICH. | |
| | | Saide City, ID 85-114 | |
| 3 | The general type of business transacted un | der the assumed husiness name is: | |
| ٠. | | | |
| | | and rubic duities | |
| | Wholesale Trade Construction | | |
| | ☐ Services ☐ Agriculture | Submit Certificate of | |
| | ☐ Manufacturing ☐ Mining | Assumed Business | |
| | Finance, Insurance, and Real Estate | Name and \$25.00 fee to: | |
| 1 | The name and address to which future | | |
| 4. | correspondence should be addressed: | Secretary of State | |
| | correspondence should be addressed. | 450 North 4th Street PO Box 83720 | |
| | Then My Kyes. | / Boise ID 83720-0080 | |
| | 4981Willinder Blod. | 208 334-2301 | |
| | Gorden City, ID 83+10 | <u> </u> | |
| 5. | Name and address for this acknowledgmen | ıt . | |
| | COPy is (if other than # 4 above): | | |
| | | | |
| | | | |
| | | Secretary of State use only | |
| | | Georgia of State use only | |
| Signa | ture: Jagin ware | | |
| Printe | d Name: Magie Warne | | |
| | city/Title: oware | IDANO SECRETARY OF STATE | |
| Signature: | | 03/13/2012 05:00 CK: 5763 CT: 268083 BH: 1314824 | |
| Printed Name: | | 1 0 25.00 = 25.00 ASSUM MAME # 2 | |
| Cana | city/Title: | N153966 | |

abn.pmd Rev. 07/2010