

## 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.

2009 OCT -8 PM 4: 48
SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.
NOTE: See instructions on reverse before filing.

Cam	p 3 Solutions	
The true name(s) and business address business under the assumed business n     Name     Kenneth James Newbry  3. The general type of business transacted	ame:	Complete Address 4595 John Adams Parkway Idaho Falls, ID 83406
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta  4. The name and address to which future correspondence should be addressed:  Kenny Newbry  4595 John Adams Parkway Idaho Falls, ID 83406  5. Name and address for this acknowledge	on ite 	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Bolse ID 83720-0080 (208) 334-2301
COPY is (if other than # 4 above):		
		Secretary of State use only
Signature:  Printed Name: Kenny Newbry  Capacity/Title: Owner  (see instruction # 8 on back of form)	groopkemette formstelnyds Revised Official	IDAHO SECRETARY OF STATE 10/08/2009 05:00 CK: 320606 CT: 172099 DH: 1190424 1 0 25.00 = 25.00 ASSUM MANE #

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