



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2012 JUL 27 AM 9:30

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

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2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

William L. Cyr

390 N 5th Street E, Driggs, ID 83422

Steven A. Wood, Jr.

3125 Mechanic Street, Newport, NY 13416

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input checked="" type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
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

4. The name and address to which future correspondence should be addressed:

William L. Cyr

390 N 5th Street E

Driggs, ID 83422

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature: [Signature] 7/24/2012

Printed Name: William L. Cyr

Capacity/Title: Chief Executive Officer

Signature: [Signature] 7/24/2012

Printed Name: Steven A. Wood, Jr.

Capacity/Title: Chief Operations Officer

Secretary of State use only

IDAHO SECRETARY OF STATE
07/27/2012 05:00
CK: 20416785298 CT: 272749 BH: 1333622
1 @ 25.00 = 25.00 ASSUM NAME # 2

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