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

2014 DEC 10 AM 11: 33

SECRETARY OF STATE STATE OF IDAHO

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

The assumed business name which the undersign business is: FHRanch	ned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name B. Michael Francis 5 (Sa	e entity or individual(s) doing Complete Address Bowman Ln. Lman, TO 83467
3. The general type of business transacted under th Retail Trade Transportation and I Wholesale Trade Construction	■ 1
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: B. M. charl Francis 50 Bowman Ln. Salman, ID 83467	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above).	
Signature: B. Michael Founcis	Secretary of State use only
Printed Name: B. Michael Francis	IDAMO SECRETARY OF STATE 12/18/2014 05:00
Capacity/Title: Owner	CK: 575314257 CT: 158010 BH: 145233 10 25.00 = 25.00 ASSUM NAME #4

abn.pmd Rev. 07/2010

9/21/2012

Printed Name: _____

Capacity/Title:

1)115408