

CERTIFICATE OF ASSUMED BUSINESS NAME

10 SEP 24 AM 10: 57

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

STATE OF IDAHO

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

| 1. The assumed business name which the understand business is: | signed use(s) in the transaction of |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| 2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Philip C. Coulson 5 | the entity or individual(s) doing Complete Address 709 5 (a) a RU Son Se — 2 83709 |
| 3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate | |
| 4. The name and address to which future correspondence should be addressed: 500 5. Cole 20 300 50 10 83709 | 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: Coulson | Secretary of State use only |
| Capacity/Fittle: Signature: Printed Name: Capacity/Title: | IDAHO SECRETARY OF STATE 99/24/2010 05:00 CK: 3717 CT: 251514 RH: 1240331 1 9 25.00 = 25.00 ASSUM NAME # 2 |

abn.pmd Rev. 07/2010

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