

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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

2012 JAN 25 AM 8: 52 SECRETARY OF JATE STATE OF DAHO

| Leapfrog Architecture 2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: | |
|---|---|
| | |
| Carolyn D Finlaison | 324 21st Avenue, Lewiston, ID 83501 |
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| The general type of business transacted und | ler the assumed business name is: |
| Retail Trade Transportation a | and Public Utilities |
| | |
| Services Agriculture | |
| Manufacturing Mining | Submit Certificate of Assumed Business |
| Finance, Insurance, and Real Estate | Name and \$25.00 fee to: |
| The name and address to which future | Secretary of State |
| correspondence should be addressed: | 450 North 4th Street |
| Leapfrog Architecture | PO Box 83720 Boise ID 83720-0080 |
| 624 21st Avenue | 208 334-2301 |
| Lewiston, ID 83501 | |
| Name and address for this acknowledgment | |
| COPY is (if other than # 4 above). | |
| same | |
| | Secretary of State use only |
| ture: 1-23-12 | |
| d Name: Carolyn Finlaison | 1 |
| city/Title: Architect/Owner | |
| ure: | IDAND SECRETARY OF STATE |

abrupred Rev. 07/2010

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