

CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 APR -5 AM 9: 19 SECRETARY OF STATE

Please type or print legibly. NOTE: See instructions on reverse before filing.	SECHET OF IDAHO
1. The assumed business name which the undersigned business is:	
2. The true name(s) and business address(es) of the e business under the assumed business name: Name 1502	Complete Address Lowell Idaho Falls ID 83402
3. The general type of business transacted under the a	issumed business name is:
Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West
1502 LOUE 11 \$ 4 4 ho falls, \$ 5 8 3 4 0 2	PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
	Secretary of State use only
Signature: Roland Corl Printed Name: Roland Qrl Capacity/Title: Q NeR	IDAHO SECRETARY OF STATE 04/05/2010 05 a 00 CK: 4153 CT: 158818 BH: 1216195

(see instruction #8 on back of form)

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