FILED EFFECTIVE



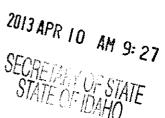
Capacity/Title: CO () NVOY

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.



1. The assur business i	s:	hich the undersign	ed use(s) in the transaction of	_
	name(s) and <u>business</u> under the assumed bu <u>Name</u> Leu Sapp	isiness name:	entity or individual(s) doing Complete Address Meadowbreeze CT. Stal 93669	<u>-</u> -
Reta Who Sen Mar Fina 4. The name	ail Trade	ansportation and Pu onstruction griculture ining 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	
_	d address for this acknother than # 4 above):	nowledgment	255 554 2552	
Signature:	Matthew Sapp Ziner Carrie Sapp		Secretary of State use only IDAHO SECRETARY OF STATE 24/16/2013 05:0 CK: 103473940999 CT: 281721 BH: 1 1 0 25.00 = 25.00 ASSUM NAME	368756

abn.pmd Rev. 07/2010

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