CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned



gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction/of	
business is:	
Triple I Ente	y Prise
The true name(s) and business address business under the assumed business r	• • • • • • • • • • • • • • • • • • • •
Jessie Martinez	Complete Address 397 E. Center st
	Shelley Idoho 83274
The general type of business transacted (mark only those that apply)	I under the assumed business name is:
Retail Trade Manufactu	ring Transportation and Public Utilities
☐ Wholesale Trade ☐ Agriculture ☐ Construction	
The name and address to which future correspondence should be addressed:	Phone number (optional): (208) 357- 5847
Jessie Martinez	Submit Certificate of Assumed Business
. 397 E Centra st	
Shelley Idalio 83274	Secretary of State 700 West Jefferson
Name and address for this acknowledge copy is (Fother than # 4 above):	nent Basement West PO Box 83720
SAME AS # 4	Boise ID 83720-0080 208 334-2301
	Secretary of State use only
	IDAHO SECRETARY OF STATE 8
gnature. Masting	08/11/2000 09:00/ CK: 524 CT: 134670 BH: 348596
inted Name: Jessie Martinez	1 0 20.86 = 20.80 ASSUM NAME (
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(see instruction # 8 on back of form)	D 38113