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CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIV

2015 JAN -6 PM 3: 05

SECRETARY OF STATE STATE OF IDAHO

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 assumed business name which the undersigned use(s) in the transaction of business is: StoneGarden Sheds The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Concrete Stoneworks, Inc. 546 Grandview Dr N Twin Falls ID 83301 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade ■ Construction Wholesale Trade Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed; 450 North 4th Street PO Box 83720 Concrete Stoneworks, Inc. Boise ID 83720-0080 546 Grandview Dr N 208 334-2301 Twin Falls, ID 83301 5. Name and address for this acknowledgment CODY IS (if other than # 4 above); Secretary of State use only Signature:____ Printed Name: Jeff Dishaw

10AHO SECRETARY OF STATE 01/06/2015 05:00

CK:2476754 CT:172099 BH:1455791 10 25:00 = 25:00 ASSUM NAME #3

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9/21/2012 abn.pmg Re

Capacity/Title: President

Printed Name:

Signature: ___

Capacity/Title: ___