## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

- 2013 DEC 30 AM 9: 43

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

STORE IN THE STATE
STATE OF THE OF

The true name(s) and <u>business</u> address(es) business under the assumed business name Name	or the entity or individual(s) doing
Name	
	Complete Address
Macs Designs LLC	1195 W. Palouse Dr, Post Falls, ID 83854
W152555	
The general type of business transacted un	der the assumed business name is:
	and Public Utilities
Wholesale Trade Construction	
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 correspondence should be addressed:	Secretary of State 450 North 4th Street
Susan Hinkley	PO Box 83720
1195 W. Paiouse Dr. Post Falls, ID 83854	Boise ID 83720-0080
THE THE PERSON SELECTED SELECTION OF THE SELECT	208 334-2301
Name and address for this acknowledgmen	nt
COPY is (if other than # 4 above):	
A AGUILLA IA	Secretary of State use only
ture: <u>Swilly</u>	
d Name: Susan Hinkley	
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city/Title: Owner/Manager	IDAHO SECRETARY OF STATE

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