

## 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.

06 SEP 11 PM 4: 00

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the under	STATE OF IDANO ersigned use(s) in the transaction of
business is: RAPI A ROOTE	R
	Complete Address  13320 N. FAULKNER Rd  MOUN FIAN Home, Id 83647
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson
correspondence should be addressed:  SAMO  5. Name and address for this acknowledgmen	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
COPy is (if other than # 4 above):	794-1314
	Secretary of State use only
Signature: Signature required) (signature required)	IDAHO SECRETARY OF STATE  9/11/2006 05:00  CK: 908804 CT: 172099 BH: 974543  1 8 25.00 = 25.00 ASSIM NOME # 2
Capacity/Title: OWNET	IDAHO SECRETARY OF STATE  9/11/2006 05:00  CK: 908804 CT: 172099 BH: 974543  1 8 25.00 = 25.00 ASSUM NAME # 2