

Capacity/Title:_

CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 SEP 12 AM 9: 35

SECRETARY OF STATE STATE OF IDAHO

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

| Prist | ine Details | |
|--|---|--|
| . The true name(s) and <u>business</u> address(e business under the assumed business na <u>Name</u> Hector Maldonado Jr. | , , , , , , | |
| | Twin Falls, ID 83301 | |
| The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate. The name and address to which future correspondence should be addressed: Hector Maldonado Jr. | on and Public Utilities Submit Certificate of Assumed Business | |
| 339 Tyler St. Twin Falls, ld 83301 Name and address for this acknowledgment | Boise ID 83720-0080 208 334-2301 ent | |
| COpy is (if other than # 4 above): | | |
| 1/4 | Secretary of State use only | |
| nature: Hector Maldonado Jr. | | |
| pacity/Title: Owner | , | |
| nature: | IDAHO SECRETARY OF STATE 69/12/2011 95: 09/12/2011 95: | |
| eted Name: | CK: 196198 CT: 158810 BH: 1 1 8 25.88 = 25.88 ASSUM N | |

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