

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.

2012 FEB 22 AIIII: 33

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

SECRETARY OF STATE STATE OF TOAHO

. The true name(s) and <u>business</u> address business under the assumed business	s(es) of the entity or individual(s) doing name:
<u>Name</u>	Complete Address
Michael J. Grim	619 S. Queens Dr. Nampa, Idaho 83687
Trina K. Grim	619 S. Queens Dr. Nampa, Idaho 83687
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Est	Submit Certificate of Assumed Business
 The name and address to which future correspondence should be addressed; Michael Grim 	Secretary of State 450 North 4th Street PO Box 83720
619 S. Queens Dr.	Boise ID 83720-0080 208 334-2301
Nampa, Idaho 83687	206 534-2301
Name and address for this acknowledge copy is (# other than # 4 above):	ment -
ature:	Secretary of State use only
ed Name: Michael J. Grim	-
acity/Title Owner	_
	-

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190HO SECRETARY OF STATE 02/22/2012 05:00 CK: 1117 CT: 267256 BH: 1311662 1 0 25.00 = 25.00 ASSUM NAME \$ 2