

Capacity/Title: Wunter

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly. NOTE: See instructions on reverse before filing.

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| The assumed business name which the undersigned business is: Mead Editing | d use(s) in the transaction of |
|---|--|
| 2. The true name(s) and business address(es) of the elbusiness under the assumed business name: Name Caye Cabe 341 | Complete Address Nighway 55 10. Show Bend Jd 83629 |
| 3. The general type of business transacted under the | |
| Wholesale Trade ☐ Construction ∑ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate | Submit Certificate of Assumed Business Name and \$25.00 fee to: |
| 4. The name and address to which future correspondence should be addressed: 341 Highway 55 Hence shee Bond St 83629 | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| Name and address for this acknowledgment copy is (if other than # 4 above). | Phone number (optional): 208-793-3393 |
| | Secretary of State use only |
| Signature: Saye (signature required) Printed Name: Saye Cabe. Canacity/Title: AUXILA. | IDAHO SECRETARY OF STATE @8/06/2004 05:00 CK: 1747 CT: 158010 BH: 759477 1 0 25.00 = 25.00 ASSUM MANE # 3 |

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