

CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned 2012 JUL 17 AM 8: 38

	submits for filing a certificate of Assumed Business Na	ame.
	Please type or print legibly. Instructions are included on back of application.	STATE OF IDAHO
1.	The assumed business name which the undersigned business is:	•
2.	The true name(s) and <u>business</u> address(es) of the ebusiness under the assumed business name: Name (Arace Anne Gamb 1035	Complete Address Center Due, Payette, ID 8366
3.	The general type of business transacted under the a Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	•
4.	The name and address to which future correspondence should be addressed: Grace Gamb 1025 Center We Playette, TD 831661 208405 8708	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 shove):	
Printe Sapa Signa Printe	ture:	IDAHO SECRETARY OF STATE 97/17/2012 95:20 CK: 253 CT: 158010 BH: 1332345 1 9 25.00 = 25.00 ASSUM MANE # 2
-apai	city/Title: <u>Owner</u>	