

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.

09 OCT 26 PM 1:21

SECRETARY OF STATE STATE OF IDAHO

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

(see instruction # 8 on back of form)

| 1. The assumed business name which the undersignate business is: Bee Hive Round | ed use(s) in the transaction of |
|--|---|
| 2. The true name(s) and business address(es) of the business under the assumed business name: Name Amele Ama Grey Monun | entity or individual(s) doing Complete Address 425 Bacan Drive Bay, 10 83712 |
| 3. The general type of business transacted under the Retail Trade Transportation and Positive Transportation and Positive Trade Construction Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future | |
| correspondence should be addressed: Himee and Greek Moran 425 Barn Drive Brise, 1D 83712 5. Name and address for this acknowledgment | 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301 |
| COpy is (if other than # 4 above): | Secretary of State use only |
| ignature: (elignature required) rinted Name: Mee Mow | IDANO SECRETARY OF STATE 10/26/2009 05:00 CK: CASH CT: 158018 DH: 11926 |