

CERTIFICATE OF FILED EFFECTIVE ASSUMED BUSINESS NAME 10 007 -4 AM 8: 48 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. SECRICIARY OF STATE STATE OF IDAHO

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

The assumed business name whice business is: Aug born Text T	h the undersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> ad business under the assumed business where the assumed business was a struction with the second struction with	Complete Address
Retail Trade Trans Wholesale Trade Cons Services Agric Manufacturing Minin Finance, Insurance, and Rea 4. The name and address to which fur correspondence should be address 378/ N 3386 F	Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
5. Name and address for this acknown copy is (if other than # 4 above):	200 001 200
Signature:	Secretary of State use only
Printed Name: Kandy Kayborn Capacity/Title: Member Signature: Kandy Kayborn Capacity/Title: Member Capacity/Title:	IDAHO SECRETARY OF STATE 10/04/2010 05:00 CK: 23819911 CT: 158810 RH: 1241533 1 2 25.00 = 25.00 ASSUM NAME # 2
	bh.pmd Rev.07/2010 01425 47