

CERTIFICATE OF ASSUMED BUSINESS NAME

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

NOTE: See instructions on reverse before filing.

Printed Name: Tami Dupuis

(see instruction # 8 on back of form)

Capacity/Title: CEO - Partner

Factory Drive Rac	lewear
. The true name(s) and business address(es) of business under the assumed business name Name	Complete Address
Taylor William Dusuis	200 State Street
Taylor William Dupuis - Tami Lyn Dupuis -	Salmon Id. 83467
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West
Taylor Dupuis	PO Box 83720
200 State St Salinon, Id. 83447	Boise ID 83720-0080 208 334-2301
. Name and address for this acknowledgment	Phone number (optional):
Copy is (If other than # 4 above):	202.756.1492
200 State St. Salmon Id. 83467	Secretary of State use only

IDAHO SECRETARY OF STATE

08/13/2008 05:00

CK: 507 CT: 158618 BH: 1131414

1 8 25.00 = 25.00 ASSUM NAME # 2

Dishons