## **CERTIFICATE OF ASSUMED BUSINESS NAME**

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. \* - 1911 13 PH 4: 14

STATE OF IDAHO

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

(see instruction # 8 on back of form)

business is: Blue Sprir	ngs Water
2. The true name(s) and business address(es) business under the assumed business name  Name  Sharp Water of Idaho, Inc.	of the entity or individual(s) doing e: Complete Address 1401 Shoreline Dr., Ste. 2, Boise, ID 83702
3. The general type of business transacted und	der the assumed business name is:
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:  Sharp Water of Idaho, Inc.  1401 Shoreline Dr., Ste. 2  Boise, Idaho 83702	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgme copy is (if other than # 4 above):</li> </ol>	Phone number (optional):  (208) 345-9100
P.O. Box 1544	Secretary of State use only
Boise, ID 83702  gnature:  (signature required)  Brian F. McColl  Attorney	IDAHO SECRETARY OF STATE  ### ### ### ### ####################

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