

CERTIFICATE OF ASSUMED BUSINESS NAME

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

35 FEB -3 AH 10: 08

FILED EFFECTIVE

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

SECRED OF STATE STATE

2. The true name(s) and business address(es) business under the assumed business name Name	of the entity or individual(s) doing Complete Address
Jacob Rothenbuhler	3814 W. Dorian St., Boise, ID 83705
Adam Rothenbuhler	3814 W. Dorian St., Boise, ID 83705
3. The general type of business transacted under Retail Trade Transportation as Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Jacob Rothenbuhler 3814 W. Dorian St., Boise, ID 83705	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-859-5282
	Secretary of State use only
gnature: (signature required) inted Name: Jacob Rothenbuhler apacity/Title: Partner (see instruction # 8 on back of form)	3
inted Name: Jacob Rothenbuhler Jacob Rothenbuhler	
apacity/Title: Partner	2-15-15-15-00 BOIDS
(see instruction # 8 on back of form)	CK: 2115 CT: 158010 DH: 790864 1 0 25.00 = 25.00 ASSUM MANE #

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