227	
CERTIFICATE OF ASSUMED BUSINESS NAM Pursuant to Section 53-504, Idaho Code, the unders submits for filing a certificate of Assumed Business N Please type or print legibly. Instructions are included on back of application	igned ZUI4 MAR -5 AM II: 07 Name. SECRETARY OF STATE STATE OF IDAHO
1. The assumed business name which the undersigned business is:	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: <u>Name</u> <u>Amy Packer</u> <u>Travits Packer</u>	
<ul> <li>3. The general type of business transacted under the</li> <li>Retail Trade</li> <li>Wholesale Trade</li> <li>Construction</li> <li>Services</li> <li>Agriculture</li> <li>Manufacturing</li> <li>Mining</li> <li>Finance, Insurance, and Real Estate</li> </ul>	
4. The name and address to which future correspondence should be addressed: <u>AMU FACKEN</u> <u>2048 W. Teano Dr.</u> <u>Heridian</u> , ID 83644	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature: <u>AMY Facter</u> Printed Name: <u>Amy Facter</u> Capacity/Title: <u>owner</u>	Secretary of State use only
Signature: The Printed Name: Travis A. Packer Capacity/Title: Co- puner	IDAHO SECRETARY OF STATE 0.3/05/2014 05:00 CK: CASH CT: 150010 BH: 1413632 1 & 25.00 = 25.00 ASSUM NAME # 2
9/21/2012 abn.pmd Rev. 07/2010	D169446