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CERTIFICATE OF ASSUMED BUSINESSIAMET CTIVE (Please type or print legibly. See instructions on reverse.)	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. STATE OF IDAHO STATE OF IDAHO	
1. The assumed business name which the undersigned use business is: Marketing Resource	e(s) in the transaction of
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
BRIAN PRONER 1140	mpiete Address Welch Lane Falls
Idak	83301
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
☐ Wholesale Trade ☐ Agriculture ☐ Fin	insportation and Public Utilities ance, Insurance, and Real Estate ning
4. The name and address to which future Phone number correspondence should be addressed: RIAN (RONER Marketing Resource)	· ·
1140 Welch Cane	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Twin Falls, ID. 83301	Secretary of State 700 West Jefferson
 Name and address for this acknowledgment copy is (if other than #4 above). 	Basement West PO Box 83720 Bolse ID 83720-0080
	8ecretary of State use only
Signature:	IDAHO SECRETARY OF STATE
Printed Name: BRIAN CRONER	09/06/2000 09:00 CK: 1129 CT: 135634 BH: 346588
Capacity: SNA A on back of form)	1 0 20.00 = 20.00 ASSUM NAME # 2

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