

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2015 FEB 18 PM 4: 25
SEGRETARY OF STATE
STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

2.	The true name(s) and <u>business</u> address(es business under the assumed business name	
	<u>Name</u>	Complete Address
	Razorback Offroad Specialty LLC	210 Gray Ave., Weiser, ID 83672
	W127412	_
3.	The general type of business transacted ur Retail Trade Transportation Wholesale Trade Construction Services Agriculture	nder the assumed business name is: n and Public Utilities
	☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: Jim L. Todd 210 Gray Ave., Weiser, ID 83672	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): Same As Above	nt
		Secretary of State use only
nte pa	ed Name: Jim L. Todd acity/Title: Manager/Member ature: Jun Todd	IDAHO SECRETARY OF STATE 02/18/2015 05:00 CK:1165 CT:306584 BH:1462 16 25:00 = 25:00 ASSUM NAM

abn.pmd Rev. 07/2016

9/21/2012

Capacity/Title: Manager

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