

Signature:_____

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2015 JUL 20 AH 9: 05

| Fining (ee. \$25.00. | | |
|--|--|--|
| The assumed business name which the | undersigned use(s) in the | SECRETARY OF STATE |
| | nCraft of Oregon | transaction of business is. |
| 2. The individual and/or entity names and to the assumed business name (do not inclusive Rose River LLC / \(\text{N} \) [53215) | business address(es) of the | ose doing business under |
| 6719 SW Macadam Ave | Portland | OR 97219 |
| | (3.17) | (State) Zacese |
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| | | · · · · · · · · · · · · · · · · · · · |
| 73 8 | 2 ¹² | 14 (7.95 (1.95) 1.6 MeV |
| 3. The general type of business transacted | under the assumed busing | ess name is: |
| سيما | truction | portation and Public Utilities |
| ⊠ Services | ıfacturing 🔲 Finan | ce, Insurance, and Real Estate |
| 4. Mailing address for future corresponden | ce: 5. Name and a copy is (if other | address for this acknowledgment |
| Rose River LLC / Bloem | | |
| PO Box 430 | Tij f speke | |
| 434,70 | and the stage | |
| Post Falls ID 83877 | 11.1 × 11 | 78 JULY 1997 1997 1997 1997 1997 1997 1997 199 |
| Printed Name: Arhy Bloem | | Secretary of State use only |
| Signature: | | IDAHO SECRETARY OF STATE |
| Printed Name: | | 07/21/2015 05:00 |
| Signature: | 1 | 779 CT:121763 BH:1484675 3.00 = 25.00 ASSUM NAME #2 |
| Printed Name: | | |

D 180353