

CERTIFICATE OF ASSUMED BUSINESS NAMEFILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filling a certificate of Assumed Business Name. 19 AM 9:00

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

	The assumed business name which the und business is: Mirror Homes The true name(s) and business address(es)	
	business under the assumed business name	ne: Complete Address
	Gregory Brian Wright	13325 Ranchero Way North
		Grass Valley,CA 95949
3.	 Wholesale Trade Services Manufacturing Construction Agriculture Mining 	and Public Utilities Submit Certificate of Assumed Business
4.	The name and address to which future correspondence should be addressed: Greg Wright PO Box 7533 Auburn CA 95604	Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgmen copy is (if other than # 4 above):	nt
Printe	ed Name: Gregory B. Wright	Secretary of State use only
•	city/Title: Owner	•
Signature: Printed Name:		IDAHO SECRETARY OF STATE 9/19/2012 95:00 CX: 18636 CT: 274427 BH: 1346424 1 8 25.80 = 25.80 ASSUM WANE # 2
Capacity/Title:		

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