

9/21/2012

CERTIFICATE OF FILED EFFECTIVE CLEAR FORM. ASSUMED BUSINESS NAME

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

2013 NOV 14 PM 3: 48

SECRETARY OF STATE STATE OF IDAHO

D 167062

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

The assumed business name which the under business is:	signed use(s) in the transaction of
Rugged Cut Custom	
The true name(s) and <u>business</u> address(es) or business under the assumed business name: Name	Complete Address Physical Address
James Lozav	Troy Idaho 83871
3. The general type of business transacted under	er the assumed business name is:
Wholesale Trade Construction Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: POBOK 58 Troy (500) 83871	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 acknowledgment copy is (if other than # 4 above).	
Signature: Mc Pr	Secretary of State use only
Printed Name: Javas C Lovar	
Capacity/Title: Owner	
Signature:	IDAHO SECRETARY OF STATE
Printed Name:	11/14/2013 05:00 CK: 1593 CT: 289784 RH: 1398889
Conscity/Title:	1 8 25.00 = 25.00 ASSUM NAME # 2

abn.pmd Rev. 07/2010