

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2005 AUG 26 AM 9: 10

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF STATE STATE OF DAMO

| Bitter Root | Quality Services |
|---|---|
| . The true name(s) and business address(e business under the assumed business na Name Michael D. Johnson | es) of the entity or individual(s) doing nme: Complete Address 1184 Power Ave., Payette, Id. 83661 |
| The general type of business transacted to Retail Trade Transportation | under the assumed business name is: on and Public Utilities |
| Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Michael D. Johnson 1184 Power Ave., Payette, Id. 83661 | Submit Certificate of Assumed Business |
| Name and address for this acknowledge copy is (if other than # 4 above). | nent Phone number (optional): |
| | Secretary of State use only |
| nature: // (signature required) ted Name: Michael D. Johnson pacity/Title: Owner (see instruction # 8 on back of form) | 1DAHO SECRETARY OF ST 100 SECRETARY OF ST |

1 8 25.00 = 25.00 ASSUM MANE # 2