

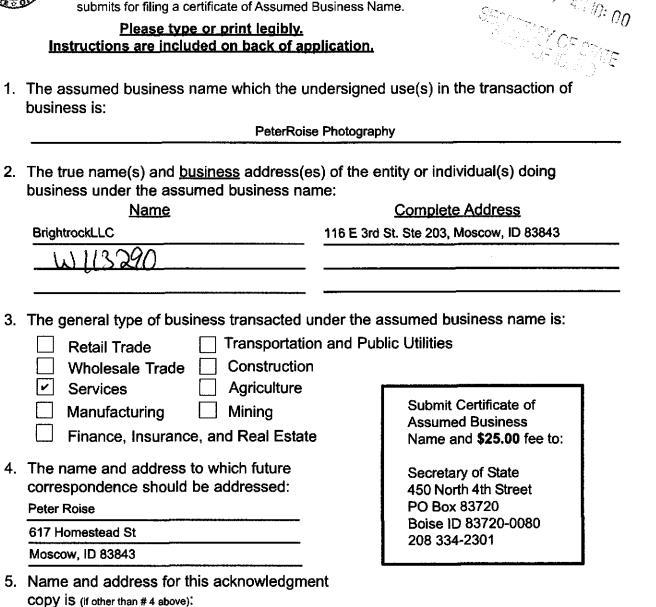
business is:

## **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.

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



	PeterRoise	Photograp	hy
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:		
	Name		Complete Address
	BrightrockLLC	116 E 3rd	St. Ste 203, Moscow, ID 83843
	W 113290		
3.	The general type of business transacted un  Retail Trade Transportation Wholesale Trade Construction Services Agriculture		
	☐ Manufacturing ☐ Mining		Submit Certificate of
	Finance, Insurance, and Real Estate		Assumed Business Name and <b>\$25.00</b> fee to:
4.	The name and address to which future correspondence should be addressed: Peter Roise		Secretary of State 450 North 4th Street PO Box 83720
	617 Homestead St		Boise ID 83720-0080 208 334-2301
	Moscow, ID 83843		200 334-2301
5.	Name and address for this acknowledgmer copy is (if other than # 4 above):	nt	
Signa	ature: Pete Ross		Secretary of State use only
Printe	ed Name: Peter Roise		
Capa	city/Title: LLC Member/Owner	i	
-	Signature:		IDAHO SECRETARY OF STATE 05/07/2012 05:00
	Printed Name:		CK: 58 CT: 111487 BH: 1323119 1 8 25.90 = 25.00 ASSUM NAME W 8
	city/Title:		
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