CERTIFICATE	
ASSUMED BUSINE	SS NAME 2015
Pursuant to Section 53-504, Idaho Co submits for filing a certificate of Assum	de the underside 4015 Mil -
Please type or print legibl	Ind Business Name, Constant of the Transformer of t
Instructions are included on back of	application.
 The assumed business name which the business is: 	e undersigned use(s) in the transaction of
EXP_DARTS_	
2. The true name(s) and business address	s(es) of the optity of individual () and
and the doodified busiliess i	name:
Name	Complete Address
TOD LI HOUDER	- 12165 N. Humpstroys NAY
	BUISE, 10 53714
3. The general type of business transacted	under the assumed business name is:
Retail Irade	ion and Public Utilities
Wholesale Trade Constructio	
Manufacturing Mining	Submit Certificate of
Finance, Insurance, and Real Esta	Assumed Business
	Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:	Secretary of State
- EXPRARTS	450 North 4th Street PO Box 83720
121/05 N. Humpitrays	Boise ID 83720-0080
BOUSE, 10 83714	208 334-2301
5. Name and address for this acknowledgme	ent
COPY iS (if other than # 4 above).	
1.001-1	7 Secretary of State use only
gnature fold for all	IDAHO SECRETARY OF STATE 01/05/2015 05:00
inted Name: Topp 11 Houser	UK:1892 CT:304727 DT: TARKA
apacity/Title: OWNER	$10\ 25.00\ =\ 25.00\ \text{ASSUM NAME}$
gnature:	\square
and a state	
rinted Name:apacity/Title:)175816