CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

2007 MAR -8 AM 8: 49

Please type or print legibly. NOTE: See instructions on reverse before filing.

Capacity/Title: <u>OWNER - SOLE PROPRIETOR</u>

(see instruction # 8 on back of form)

The assumed business name which the unbusiness is:	TOP
The true name(s) and business address(est business under the assumed business name Name	ne: Complete Address
The general type of business transacted un	
Wholesale Trade ☐ Construction Wholesale Trade ☐ Construction Bervices ☐ Agriculture Manufacturing ☐ Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: MAGNA TOP SZI N. 10th Ave. #16 Caldwell, TD 83605	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720
5. Name and address for this acknowledgme copy is (if other than #4 above): See #4	Phone number (optional): (800) 707-8604
	Secretary of State use only
ature: Michael McMiller regime) Michael Michael McMiller Michael McMiller Manual Michael Michael McMiller Manual Michael	od 64/2009

IDAHO SECRETARY OF STATE
@3/08/2007 05:00
CK: 1141 CT: 158810 BH: 1938481
1 P 25.88 = 25.80 ASSUM MAME # 2

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