

Capacity/Title: Owner

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.

2012 MAY 15 PM 1:37

Please type or print legibly.

Instructions are included on back of application.

SECRETARY THE STATE

STATE UP THAT

| | ElectroCrave | |
|--|---|---|
| The true name(s) and <u>busine</u> business under the assumed <u>Name</u> | | e entity or individual(s) doing Complete Address |
| Sabri Balcin | 2002 E | ast Linden Street |
| Lindsie Balcin | Caldwe | ell, ID 83605 |
| 3. The general type of business Retail Trade Wholesale Trade Services Manufacturing Finance, Insurance, an | Transportation and F Construction Agriculture Mining | |
| 4. The name and address to who correspondence should be as Sabri & Lindsie Balcin 2002 East Linden Street Caldwell, ID 83605 | nich future | Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| 5. Name and address for this accepy is (if other than # 4 above): | cknowledgment | |
| | | Secretary of State use only |
| gnature: | | |
| inted Halfiet | | |
| apacity/ Filio | <u>'^</u> | |
| | | |
| rinted Name: Lindsie Balcin | | TOTAL OF STATE |

abn.pmd Rev. 07/2010

IDAHO SECRETARY OF STATE

05/16/2012 05:00

CK: CASH CT: 158010 BH: 1324415

1 8 25.00 = 25.00 ASSUM NAME # 3

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