## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned AR 29 PM 3: 13 submits for filing a certificate of Assumed Business Name:

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

(see instruction # 8 on back of form)

SECRETARY OF STATE

| 2. The true name(s) and business address(e business under the assumed business na  | es) of the entity or individual(s) doing  |
|--|---|
| Name   | Complete Address  |
| Joshua R. CHRISTIANSON   | 1899 TRAIL BUZER DR. MERIDIAN, ID 8364  |
|  | THIS OWNER VI., MER, VIAU, +12 8)61   |
|  |   |
| 3. The general type of business transacted upon the services and the services and Real Estate Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:  3327 N. CAUE, S. 100 DMB 101 MERION, TO BROWN, TO BROWN. | Submit Certificate of Assumed Business  |
| 5. Name and address for this acknowledgme copy is (if other than # 4 above):   | ent Phone number (optional):  (208) 830 - 9944  |
|  | Secretary of State use only   |
| · · · · · · · · · · · · · · · · · · ·  | Parked October State of Comparation |

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