CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the understance of 14 Pil 2: 09

2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	Name		emplete Address Laces for both
	Wade Winnight	P.O. Box	
	Wade Winnight Tiffany Ensey	Sandpoin	t, ID 83864
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)		
	☒ Retail Trade ☐ Manufacture ☐ Wholesale Trade ☐ Agriculture ☒ Services ☐ Construction	Fi	ansportation and Public Utilities nance, Insurance, and Real Estate ining
4.	The name and address to which future		
	Wade Winnight & Tiffany Ensey		Submit Certificate of Assumed Business
	P.O. Box 1687		Name and \$20.00 fee to:
	Sandpoint, ID 83864	-	Secretary of State
	•	al	700 West Jefferson Basement West
5.	Name and address for this acknowledge	nent •	PO Box 83720
	COPY IS (If other than # 4 above):		Boise ID 83720-0080 208 334-2301
			200 334-2301
			Secretary of State use only
		Revision 2/97	
Signati	ure: Jam Jam	a a	IDANO SECRETARY OF STATE
Printed	Name: T. Hany Ensey	944	10/14/1999 89:88 Di: 1109 CT: 121750 Ni: 250074
Capac	ity: General Partner	corplometatin pm	1 9 29.96 = 29.88 ASSAM NAME # 2
•	(see instruction # 8 on back of form)	10	D 20001