

Capacity/Title: CFO

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

10 NOV -1 AM 8: 55

SECRE LARY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

	VT Enabled
business under the assumed l	
<u>Name</u>	Complete Address
Timothy J Trottman Jr	210 E 12th St, Emmett ID, 83617
Nicola Carbone III	210 E 12th St, Emmett ID, 83617
. The general type of business	transacted under the assumed business name is:
☐ Wholesale Trade ☐ G ✓ Services ☐ G	Transportation and Public Utilities Construction Agriculture Mining Real Estate Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to whi correspondence should be ad Tim Trottman	dressed: 450 North 4th Street PO Box 83720
210 E 12th St Emmett ID, 83617	Boise ID 83720-0080 208 334-2301
5. Name and address for this act copy is (if other than # 4 above):	knowledgment
T T -	Secretary of State use only
nature:	
ited Name: Tim Troffman	
acity/Title: CEO	TRAUS SPARTING OF STATE
nature:	IDAHO SECRETARY OF STATE 11/01/2010 05:6
ited Name: Nicola Carbo	CK: 2000 CT: 252454 BH: 1245 1 P 25.00 = 25.00 ASSUM NAM

d Rev. 07/2010

D 143150