

Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2016 NOV 21 PM 12: 51

SECRETARY OF STATE STATE OF IDAHO

| 1. | The assumed business name which the undersigned use(s) in the transaction of business is: SS Speed Shop | | | | | | |
|-------------------------------|--|-------------|---|---|-----------------------------|-------------|--|
| | | | | | | | |
| | | | | | | | |
| 2. | The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1): | | | | | | |
| | Shane Schroeder 388 | | 88 SW 3RD Ave, New Plymouth, Idaho, 83655 | | | | |
| | (Name) | (Addr | (Address) | | | | |
| | (Name) (Address) (Name) (Address) (Name) (Address) | | | | <u> </u> | | |
| | | | | | | | |
| | | | | | | | |
| 2 | The general type of business transacted under the assumed business name is: | | | | | | |
| Э. | The general type of business transacted under the assumed business name is: | | | | | | |
| | Retail Trade | | Construction | | ortation and Public I | Utilities | |
| | Wholesale Trade | | Agriculture | Mining | • | | |
| | ∠ Services | | Manufacturin | ly Enanc | e, Insurance, and Ro | eai Estate | |
| 4. | Mailing address for future correspondence: | | | Name and address for this acknowledgment copy is (if other than # 4): | | | |
| | Shane Schroeder | | | | | | |
| | (Name) 3888 SW 3RD Ave | | | (Name) | | <u> </u> | |
| | (Address) | | · · · · · · · · · · · · · · · · · · · | (Address) | | | |
| | New Plymouth | ID | 83655 | | <u>-</u> | | |
| | (City) | (State) | (Zipcode) | (City) | (State) | (Zipcode) | |
| Printed Name: Shane Schroeder | | | | S | Secretary of State use only | | |
| Sie | gnature: <u>Askirki</u> | w | | | ****** | | |
| Printed Name: | | | | 11/21/2016 05:00 | | | |
| | | | | | ASH CT:158010 B | H:1556463 | |
| Si | gnature: | | | 16 25 | .00 = 25.00 ASS | UM NAME #2 | |
| Pr | inted Name: | | | | D190541 | | |