CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE. STATE OF IDAHO

(see instruction #8 on back of form)

Pursuant to Section 53-504, Idaho Code, the und gives notice of adoption of an Assumed Business	lersigned Name.
The assumed business name which the undersigned business is: Magic Valley Printing	
The true name(s) and business address(es) of the el business under the assumed business name is/are:	ntity or individual(s) doing Complete Address
Dwaine Gauger Twin F Lisa Gauger Twin F	HA ALUE E. Falls IN (330) Falls IN (330)
 The general type of business transacted under the a (mark only those that apply) 	ssumed business name is:
✓ Retail Trade ☐ Manufacturing ✓ Wholesale Trade ☐ Agriculture ✓ Services ☐ Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
 The name and address to which future Phone nur correspondence should be addressed: 	mber (optional): (208) 733-0300
Magic Valley Printing 2538 Addison Ave E	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Twin Falls ID 83301	Secretary of State 700 West Jefferson
5. Name and address for this acknowledgment copy is (if other than # 4 above): U.S. Bank Idaho	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
P.O. Box S09 Thin Falls In 83303	9941.SECREPORT FLOTING 07/18/1997 09:00 CK: 1573 CT: 1258 MI: 22513
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