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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

2011 FEB 11 PM 4:23

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Twin Falls Welcome Mat

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

RoLin Magic, LLC

(W 100206)

Complete Address

1931 N Street Heyburn, ID 83338

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

RoLin Magic, LLC

PO Box 634

Heyburn, ID 83338

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Secretary of State use only

Signature:

Printed Name: Linda Rosa

Capacity/Title: Managing Member

Signature:

Printed Name:

Capacity/Title:

IDAHO SECRETARY OF STATE
02/11/2011 05:00
CK: 685571 CT: 172699 BH: 1259758
1 D 25.00 = 25.00 ASSUM NAME # 2

Form 200 Rev. 6/2010

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