

Printed Name: ANDAGE

Capacity/Title:

Printed Name:

Capacity/Title:

Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2015 MAR 25 PM 12: 58
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: Brazilian Jiv 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address 83701 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Services Submit Certificate of Manufacturing Mining Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street VY) Boise IV PO Box 83720 IN Completion Boise ID 83720-0080 83709 208 334-2301 5. Name and address for this acknowledgment CODY IS (if other than #4 above): Secretary of State use only Signature: MACK

10AHO SECRETARY OF STATE 03/25/2015 05:00

CK:1354 CT:308142 BH:1467868 18 25.00 = 25.00 ASSUM NAME #2

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