

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly. NOTE: See instructions on reverse before filing. 2013 MAR- +9 - AM - 9: 00

SECRETARIO STATE STATE OF TOAHO

2. The true name(s) and business address business under the assumed business Name X&A Campy, Fac. (147559)	ss(es) of the entity or individual(s) doing
3. The general type of business transacted Retail Trade	tation and Public Utilities ction ure Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
5. Name and address for this acknowled copy is (if other than # 4 above);	fgment Phone number (optional):
	Secretary of State use only
nature:	IDAHO SECRETARY OF STATE OSCILLATION OF STATE OSCILLATION OF STATE OSCILLATION OF STATE

