CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.
Filing fee: $25.00.

FILED EFFECTIVE
2016 FEB 16 AM 9:48
SECRETARY OF STATE
STATE OF IDAHO

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

   Tyrell Peters Loss Adjusting

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

   Tyrell Peters — 1359 E Lancaster Rd Hayden Id 83834
   (Name) (Address)

   (Name) (Address)

   (Name) (Address)

   (Name) (Address)

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

   - [ ] Retail Trade
   - [ ] Wholesale Trade
   - [ ] Services
   - [ ] Construction
   - [ ] Agriculture
   - [ ] Manufacturing
   - [ ] Transportation and Public Utilities
   - [ ] Mining
   - [x] Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

   Tyrell Peters
   (Name)
   1359 E Lancaster Rd
   (Address)
   Hayden Id 83835
   (City) (State) (Zipcode)

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

   (Name)
   (Address)
   (City) (State) (Zipcode)

Printed Name: Tyrell Peters
Signature: Tyrell Peters
Printed Name:
Signature:
Printed Name:
Signature:

Secretary of State use only

IDAHO SECRETARY OF STATE
02/17/2016 05:00
CK:1097 CT:158010 BH:1513883
1@ 25.00 = 25.00 ASSUM NAME #2

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