Capacity/Title:_

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. Instructions are included on back of application.



Divine Dzion	
The true name(s) and <u>business</u> address(e business under the assumed business na Name D & D Distribution,LLC W/14742	es) of the entity or individual(s) doing me: <u>Complete Address</u> P.O. Box 266 Mountain Home, Idaho 83647
The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Divine Dzion P.O. Box 266	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Mountain Home, Idaho 83647 Name and address for this acknowledgme copy is (if other than # 4 above): Diane Patton 1044 NW Kloe St Mountain Home, Idaho 8364	Secretary of State use only
nature:	IDAHO SECRETARY OF STATE 96/12/2012 95: CK: 1133 CT: 271359 BH: 132

abn.pmd Rev. 07/2019

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