CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

(see instruction # 8 on back of form)

Pursuant to Section 53-504, Idaho Code, the undersigned

1	gives notice of adoption of an As The assumed business name which the und	sumed Business Name. 🤚 🥳 🥏
١.	business is:	-
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	<u>Name</u>	Complete Address
		P.O. Box 126
		Swan Valley ID 83449
3.	The general type of business transacted un (mark only those that apply)	der the assumed business name is:
	☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☒ Services ☒ Construction	☐ Finance, Insurance, and Real Estate ☐ Mining
4.	The name and address to which future correspondence should be addressed:	
	Valley Execution	Submit Certificate of Assumed Business Name and \$20.00 fee to:
	P.O. Box 126 Swon Valley ID 8.	700 West Jefferson
5.	Name and address for this acknowledgmen copy is (if other than #4 above):	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		Secretary of State use only IDAHO SECRETARY OF STATE
Olassa (7/1/5	IDAHO SECRETARY OF STATE 88/39/2000 09:00 CK: 684 CT: 135482 BH: 345887
Signati	1/1	1 8 28.00 = 20.00 ASSUM NAME # 2
Printed	d Name:	D 39575
Capac	sity: Owner	mstat