Capacity/Title: _ Ow Neへ



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE 10 SEP 13 AM 11: 46

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

SECKETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

1. The assumed business name which the understand business is: Olege and University Oniversity	signed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Roger John Tile Stephen Lynn Lewis	the entity or individual(s) doing Complete Address HSS Rossi Boise Id 837
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: Roger John Ture 485 Rossi St. Roise To 43706	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature: Roger John Tuile Capacity/Title: Owner	Secretary of State use only $O(4200)$
Signature: Styl L	IDAHO SECRETARY OF STATE 99/13/2010 95:00 CK: 511277 CT: 172899 BH: 1238647
Printed Name: Stephen Lynn /eni)	1 0 25.00 = 25.00 ASSUM MANE # 2

abn.pmd Rev. 07/2010