

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2006 MAY 19 AM 9: 24

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

| NOTE: See instructions on reverse | STATE OF 101-110 |
|--|--|
| The assumed business name which the undersig | STATE OF IDAHO ned use(s) in the transaction of |
| business is: Cabinet Mountain | |
| 2. The true name(s) and business address(es) of th | ne entity or individual(s) doing |
| business under the assumed business and | Complete Address |
| Josh SEWARD | P.O. BOX 1205 SAGIE ID, 83860 |
| | |
| 3. The general type of business transacted under t | the assumed business name is: |
| Retail Trade Transportation and Wholesale Trade Agriculture | Submit Certificate of |
| Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate | Assumed Business Name and \$25.00 fee to: |
| The name and address to which future correspondence should be addressed: | Secretary of State 700 West Jefferson Basement West |
| Josh SEWAKD Cabinet Mountain Masonry | PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| 5. Name and address for this acknowledgment | Phone number (optional): |
| copy is (if other than # 4 above): | 208-610-6529 |
| | Secretary of State use only |
| | Section of State |
| Signature: (signature required) Printed Name: Josh Seward | IDAHO SECRETARY OF STATE 1 DAHO SECRETARY OF STATE 25.00 ASSUM NAME # 2 |
| Capacity/Title: nek (see instruction # 8 on back of form) | D 100070 |