227	FILED ED
CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed E Please type or print legibly. Instructions are included on back of app	S NAME he undersigned Business Name. 2014 MAY -7 AM 8: 52 SECREMAN (FSTATE
 The assumed business name which the un business is: <u>Capes In Action</u> 	ndersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es business under the assumed business nam <u>Name</u> <u>Capes In Action Limited Company</u> <u>W1371645</u>	s) of the entity or individual(s) doing me: <u>Complete Address</u> 2705 Desert Dr, Idaho Falls, ID 83404
 3. The general type of business transacted up Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 	n and Public Utilities Submit Certificate of Assumed Business
 4. The name and address to which future correspondence should be addressed: <u>Trevor Paesi</u> <u>2705 Desert Dr</u> <u>Idaho Falls, ID 83404</u> 	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmer copy is (if other than # 4 above): 	nt
Signature:	Secretary of State use only
Printed Name: Trevor Paesl Capacity/Title: Member Signature:	IDAHO SECRETARY OF STATE 05/07/2014 05:00 CK:1058 CT:296585 BH:1423674 10 25.00 = 25.00 ASSUM NAME #
Printed Name:	D171039