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

FILED EFFECTIVE

2013 MAR 22 AM 9: 24

SECRETARY OF STATE STATE OF HOAHO

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

1. The assumed business name which the under business is:	ersigned use(s) in the transaction of
2. The true name(s) and business address(es) business under the assumed business name Name Steve Torix DBA CEdor Canyon	Complete Address 17/7 Pine Street Bupert, Idaho 83350
3. The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: SEE TOTIX THE SELECTION 83: 5. Name and address for this acknowledgmen copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
Signature:	Secretary of State use only
Printed Name: STEVE TOVIX Capacity/Title: Sole proprie for (see instruction # 8 on back of form)	1DAHO SECRETARY OF STATE 1DAHO SECRETARY OF STATE 03/22/2013 05:00 CK: 1331790 C1: 172099 BH: 1365972 1 0 25.00 = 25.00 ASSUM NAME # 2

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