

## 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.

2013 DEC 20 PM 5: 05

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

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the under business is:	rsigned 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  Light Ventures, L.L.C.  (W1000b)	Complete Address  8304 Map Keck Kal  Caldwell ID 83607
3. The general type of business transacted unde  Retail Trade Transportation an  Wholesale Trade Construction	r the assumed business name is:
Services	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  Medeulord  8304 Map Rock Rd	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:	Secretary of State use only
Printed Name: Medentand	
Capacity/Title: Tresident	IDAHO SECRETARY OF STATE
Signature:	12/20/2013 05:00 CK: 1646816 CT: 172099 BH: 1482735 1 0 25.00 = 25.00 ASSUN NAME # 3
Printed Name: Capacity/Title:	D167696
Capacity/ Flue.	D/6'16'

abn.pmd Rev. 07/2010