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CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 MAR 29 AM 8: 22

SECTORY OF STAN

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

SWAG RANCH	
The true name(s) and <u>business</u> address(abusiness under the assumed business na	ame:
Name	Complete Address
BILL HOLLOWAY HORSE SHOEING, LLC	
<u>(W80595)</u>	BUHL, ID 83316
The general type of business transacted Retail Trade Transportati Wholesale Trade Constructio	on and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business te Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: BILL HOLLOWAY	Secretary of State 450 North 4th Street PO Box 83720
1247 E 4150 N	Boise ID 83720-0080 208 334-2301
BUHL, ID 83316	200 004 2001
. Name and address for this acknowledgm copy is (if other than # 4 above).	ent
nature: SEM Wolfy	Secretary of State use only
ted Name: BILL HOLLOWAY	-
acity/Title: MEMBER	-
· — · · · · · · · · · · · · · · · · · ·	- Idaho secretary of state
nature:	03/29/2011 05:00 CX: 19336 CT: 155242 BH: 1266
ted Name:	- 1 0 25.00 = 25.00 ASSUM MAME
acity/Title:	

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