

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

2014 JAN 17 AM 9: 15

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

STATE OF LANGE

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

The assumed business name which the undersigned use(s) in the transaction of business is: Ru Ru Ru	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Name P	Complete Address 3195 N. Constantine St. 2015L FD 83704
3. The general type of business transacted under to Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: 3195 N Canstrantinest Bolse BO 83704	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):	Secretary of State use only
Signature: Printed Name: Capacity/Title: Signature:	DIGRAS IDAHO SECRETARY OF STATE 01/17/2014 05:00 CK: 1851 CT: 291863 BH: 1486464 1 8 25.88 = 25.88 ASSUM NAME # 2
Printed Name:	