

CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 JAN 26 40 1: Q6 ;

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

STATE OF TOAHO

1. The assumed business name which the unbusiness is: Shinyland Taniforial Servi	
2. The true name(s) and <u>business</u> address(est business under the assumed business name Name Name Montelongo	
3. The general type of business transacted up Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: 200 S Helen st Botse Td 83705	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	nt
Signature:	Secretary of State use only
Capacity/Title:	IDAHO SECRETARY OF STATE 01/26/2011 05:00 CK: 592153 CT: 172099 BH: 1257854 1 9 25.00 = 25.00 ASSUM NAME # 2

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