

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

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

## FILED EFFECTIVE

D 120830

08 APR 11 AM 9: 12

SECRETARY OF STATE STATE OF IDAHO

| <ol><li>The true name(s) and business address(es) of the entity or individual(s) doing<br/>business under the assumed business name:</li></ol>   |  |
|--|--|
| Name ( as the second se | Complete Address                                 |
| LARRY HAREF  |  |
| LIGHT THEE 160 S   | SpARTAN DR Regist ID. 80.                        |
|  |  |
|  |  |
| 3. The general type of hydinass transacted at the  |  |
| 3. The general type of business transacted under the   | assumed business name is:                        |
| Retail Trade Transportation and P  | ublic Militia                                    |
| †   <del>                          </del>  | ublic Utilities                                  |
| 57 -   |  |
| Services   | Submit Certificate of                            |
| ☐ Manufacturing ☐ Mining   | Assumed Business                                 |
| Finance, Insurance, and Real Estate  | Name and \$25.00 fee to:                         |
|  | 420,00 (66 to.                                   |
| 4. The name and address to which future  | Secretary of State                               |
| correspondence should be addressed:  | 700 West Jefferson                               |
| ()   | Basement West                                    |
| Same DS Above  | PO Box 83720                                     |
|  | Boise ID 83720-0080                              |
|  | 208 334-2301                                     |
|  |  |
| 5. Name and address for this acknowledgment  | Phone number (antique)                           |
| Copy is (if other than # 4 above);   | Phone number (optional):                         |
| TOPY SO (II OUTER BIRET # 4 BUOYE).  | 208 312 5629                                     |
|  |  |
|  |  |
|  | Secretary of State use only                      |
|  |  |
|  |  |
| nature: July for 1   |  |
| signature required)  |  |
| Hed Name: LARE LARE  | IDAHO SECRETARY OF STATE                         |
|  | 894/44/0000                                      |
| pated Name: Name: Name Name Name Name Name Name Name Name  | 04/11/2008 05:0<br>CX: 2328 CT: 158010 BH: 11895 |