CERTIFICATE OF ASSUMED BUSINESS NAME

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

2010 JAN 13 PM 12: 40 SEURETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2083270658

	P	eanuts Jigs		
2. The true name(s) and business address(e business under the assumed business name Name Tim Gregory		ame:	ns) of the entity or individual(s) doing me: Complete Address 717 Meadowbrook Dr. Nampa,ID 83686	
Retail Tr Wholesa Services Manufac Finance, The name and correspondence	ade	ion and Pui n	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Bolse ID 83720-0080 (208) 334-2301	
5. Name and add	dress for this acknowledgn	nent	Secretary of State use only	
nature: (Algnature required) Tim Gregory		g'octpétemstebn formstabn p88 Ravaed Deziotts	0136130	
Dacity/Title: owner (see instruction # 8 on back of form)			IDAHO SECRETARY OF STA	