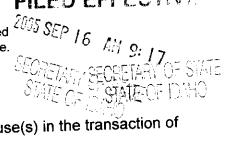


CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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.



The assumed business name which the under business is: All America	<u>, </u>
The true name(s) and business address(es) of business under the assumed business name: Name Ashlee Howell	of the entity or individual(s) doing Complete Address 963 Meadow Way, Blackfoot, ID 83221
	der the assumed business name is: and Public Utilities
Wholesale Trade ☐ Construction Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Ashlee Howell 963 Meadow Way Blackfoot, ID 83221	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above).	ent Phone number (optional): 208-785-2663
	Secretary of State use only
Signature: Signature Signature required	IDAHO SECRETARY OF STATE O9/16/2005 05 = 00 OK: 5374 CT: 191887 BH: 911981 1 @ 25.88 = 25.86 ASSUM NAME # 2

(see instruction # 8 on back of form)