

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2015 APR -8 PM 4: 05

SECRETARY OF STATE STATE OF IDAHO

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

business under the assumed busine	ress(es) of the entity or individual(s) doing
<u>Name</u>	Complete Address
Kristy Secreto	1404 4th Ave E.
	Twin Falls, ID 83301
Retail Trade Transp	acted under the assumed business name is: portation and Public Utilities ruction ulture
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real	Assumed Business
4. The name and address to which fut correspondence should be address 1404 444 Ave Ta Twin Falls, ID 8330	ed: 450 North 4th Street PO Box 83720 Boise ID 83720-0080
5. Name and address for this acknowl copy is (if other than # 4 above):	edgment
	Secretary of State use only
ignature: Actes	2)(12 (1) (1) ———————————————————————————————
rinted Name: Kri'sty Secreto	IDAHO SECRETARY OF STATE
_ /	
apacity/Title: <u>Owner</u>	04/08/2015 05:00 CK:441 CT:158010 BH:1470049

9/21/2012

abnuprnd Rev 07/2010