FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

MINUEC 22 PH 12: 43

SECRETARY OF STATE STATE OF IDAHO

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

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

Signature: Printed Name:

Capacity/Title:

The assumed business name which the undersigned business is: Sister's	ed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Shown & Sinclair 217.6	Complete Address
3. The general type of business transacted under the Retail Trade Transportation and Put Molesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: SYGWING E. Sinclair 217 20 Apr N. Name of TO \$3687	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature: Shawna Shadare	Secretary of State use only IDAHO SECRETARY OF STATE 12/22/2014 05:00
Capacity/Title:	CK:2444284 CT:172099 BH:1453

CK:2444284 CT:172099 BH:1453984 16 25.00 = 25.00 ASSUM NAME #2

D175633