Capacity: OWNers

(see instruction # 8 on back of form)

| CERTIFICATE OF ASSUMED BUSINESS NATIFED/EFFECTIVE | 3 |
|--|------|
| (Figure 1) print legibly) | |
| To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaha Call III | |
| gives notice of adoption of an Assure 1.5 | l |
| The assumed business name which the undersigned use(s) in the transaction of business is: STATE OF IDAHO | |
| business is: | |
| MendioLa & Sarria Partnership | |
| 2. The true name(s) and business address(se) su | |
| The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: | |
| | |
| Justo Sarria 2304 W. Jeppersonst. Bolse Td 837 | 92 |
| 2304 W. Jeppersonst. Bolse Fd 837 | 2 |
| | |
| 3. The general type of business transacted under the assumed business name is: | |
| (mark only triuse that apply) | |
| Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture | |
| Finance Insurance and Date In | |
| Wilning | |
| 4. The name and address to which future | |
| Meraiota d Sarria Partneyship Submit Certificate-of | |
| Assumed Business | |
| Name and \$20.00 fee to: | |
| Secretary of State | |
| 5. Name and address for this acknowledgment Copy is a second to the second term of the s | |
| copy is (if other than # 4 above): Copy is (if other than # 4 abo | |
| George Merdiche Boise ID 83720-0080 | |
| 1.50 Parkh:11 Dr. 208 334-2301 | |
| Saurate (a) | |
| Secretary of State use only | |
| Signature: Mess Douglass | |
| Printed Name: George MendioLa IDAHO SECRETARY OF STATE | |
| CK: 143 CT: 162861 RH: AR7918 | |

CK: 143 CT: 162861 BH: 483910 1 8 20.80 = 20.00 ASSUM NAME # 2

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