

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 3 MAR 22 $\,$ AN 9: 45 submits for filing a certificate of Assumed Business Name.

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



2. The true name(s) and <u>business</u> address	ess(es) of the entity or individual(s) doing
business under the assumed busines Name	ss name: <u>Complete Address</u>
SPCDA, Incorporated (C 196393)	11442 N. Carisa Ct., Hayden, ID 83835
Retail Trade Transpo	
Services Agricult Manufacturing Mining Finance, Insurance, and Real I	Submit Certificate of Assumed Business
 The name and address to which futu correspondence should be addresse SPCDA, Inc. 	d: 450 North 4th Street PO Box 83720
11442 N. Carisa Ct. Hayden, ID 83835	Boise ID 83720-0080 — 208 334-2301
5. Name and address for this acknowled copy is (if other than # 4 above):	dgment
Signature: Lindy Engl	Secretary of State use only
Printed Name: Cindy Enos	
Capacity/Title: President/Owner	TRAUG. CT. C.
Signature: Bryan Enos Printed Name: Bryan Enos	IDAHO SECRETARY OF STATE ビュノビビノス ビラニロロ CK: 34249 CT: 280698 BH: 1366058 1 0 25.00 = 25.00 ASSUM HAME # 2

D161947

Capacity/Title: Vice President/Owner