

Capacity/Title: Owner

(see instruction # 8 on back of form)

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.

10 JUN 14 AM 9: 16

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF DAHO

| business is: RC Fashions | |
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| 2. The true name(s) and business address(e business under the assumed business na Name Robert Henning | |
| 3. The general type of business transacted of Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate. 4. The name and address to which future correspondence should be addressed: **Rebert Henning** **LOSCIL N. Seaside ST** **Hayden, Id 83835** | Submit Certificate of Assumed Business |
| 5. Name and address for this acknowledgm copy is (if other than # 4 above): | nent |
| nature: Robert Henry (signature required) Ited Name: Robert Henring | Secretary of State use only |