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	CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bu Please type or print legibly.	NAME le undersigned kusiness Name. SECREMBY OF STATE
Instructions are included on back of application		STATE OF IDAHO
1. The assumed business name which the undersigned use(s) in the transaction of business is:		
2. The true name(s) and business address(es) of the entity or individual(s) doing		
business under the assumed business name: Name Complete Address		
		<u>948 No. Hwy 91, Shelley JD</u> 83274
3. The general type of business transacted under the assumed business name is:   Retail Trade Transportation and Public Utilities   Wholesale Trade Construction   Services Agriculture		
	Manufacturing Mining   Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
	e name and address to which future respondence should be addressed: <u>Red Square Inc.</u> <u>948 No. Huy 91</u> <u>Shelley ID 83274</u>	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	Mille	Secretary of State use only
Printed Name: Matthew K. Anderson DIVILay2		
Capacity/Title: <u>PresidenT</u>		
Signature: <u>Man / Anders</u> Drinted Name: <u>Man / Jackson</u> Drinted Name: <u>Man / Jackson</u> (K: 3240 CT: 185225 BH: 1236242		
Printed Name: <u>Wiee president</u>		
sbn.pmd Rev. 07/2010		