## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an Assu	ımed Business Name. ೄ 😅 🔀 🔭
The assumed business name which the under business is:	rsigned use(s) in the transaction of
ELESCO	
. The true name(s) and business address(es) or business under the assumed business name	
NILE LEWIS 86	Complete Address  4 S. 1540 W. REXBURG, IN 739
11/12 22015	17 D. 1360 W. KENSUKO, 118 (3)
	1
The general type of business transacted unde	er the assumed business name is:
☒ Retail Trade       ☐ Manufacturing         ☒ Wholesale Trade       ☐ Agriculture         ☒ Services       ☐ Construction	<ul><li>☐ Transportation and Public Utilities</li><li>☐ Finance, Insurance, and Real Esta</li><li>☐ Mining</li></ul>
The name and address to which future Pho correspondence should be addressed:	ne number (optional):
ELESCO	Submit Certificate of
864 8 1520 W	Assumed Business
	Name and \$20.00 fee to:
REXBURG ID 83440	Secretary of State
wame and address for this acknowledgment	700 West Jefferson Basement West
CODY is (if other than # 4 above):	PO Box 83720
	Boise ID 83720-0080 208 334-2301
Sevisor 188	208 334-2301 Secretary of State use only

Sig

Printed Name: Nile Lewis

Capacity: Propriet or

(see instruction # 8 on back of form)