

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2015 JAN 29 AM 9: 31 SECRETARY OF STATE STATE OF IDAHO

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

The assumed business name which the under business is:	anch
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name Name Name	of the entity or individual(s) doing Complete Address 5010 N. Mant Shada Boise, ID 03714
3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	er the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	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):	
	Secretary of State use only
Printed Name:	IDAHO SECRETARY OF STATE 01/29/2015 05:00 CK:1726 CT:305733 BH:145927 16 25:00 = 25:00 ASSUM NAME

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Printed Name:

Capacity/Title:__