

Capacity/Title:_

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.

2012 OCT 15 PH 12: 58

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

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the und business is:	_
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Joe Anthony Edgar	
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	der 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: 300 F 4911 W** Collister Dr. Boise, Fdans 83703	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):	t
Signature: Segat Printed Name: See Fd 995 Capacity/Title: OWner	Secretary of State use only
Signature: Printed Name:	IDANO SECRETARY OF STATE 10/15/2012 05:00 CK: CASH CT: 158010 BH: 1343666 1 9 25.00 = 25.00 ASSUM WAME # 2

abn.pmd Rev. 07/2010

D158724