

CERTIFICATE OF ASSUMED BUSINESS NAME

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

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2014 FEB 13 PM 2: 54

SECRETARY OF STATE STATE OF IDAHO

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

	The assumed business name which the ur business is: The Mission Commission Intl			
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:			
			Complete Address 887 E. Pine Hollow Ln	
	-	Eagle, ID	83616	
3.4.	The general type of business transacted u Retail Trade Transportatio Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: The Mission Commission PO Box 911 Eagle, ID 83616	n and Pul		
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	ent .	Secretary of State use only	
Signa	ature: Vous at Dan	>	Secretary of State use only	
-	ed Name: Douglas J. Harmon			
	city/Title: Founder			
•	ature:	[IDANO SECRETARY OF STATE	
Printed Name:		:	02/13/2014 05:00 CK: 1792631 CT: 172899 RH: 1418563	
Capacity/Title:			1 @ 25.00 = 25.00 ASSUM WANE # 2	

D168899