

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2012 OCT -1 AM 9: 25

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:	ersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name Name Lea Martensen Meeker —————————————————————————————————	• • • • • • • • •
3. The general type of business transacted under Retail Trade Transportation at Wholesale Trade Construction Services Agriculture Manufacturing Mining	and Public Utilities Submit Certificate of
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street
Normpa Jd. 83686	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 Sa Martensen Meeker	Secretary of State use only
Printed Name: Lea Martensen Meeker	
Capacity/Title: (Yuner	IDAHO SECRETARY OF STATE 10/01/2012 05:00
Signature:	CK: 1148419 CT: 172099 BH: 1341757 1 8 25.08 = 25.00 ASSUM NAME # 2
Printed Name:	
Capacity/Title:	

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