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

2009 DEC 23 PM 12: 53

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

1. The assumed business name which the und business is: Wheels and Thrills	
2. The true name(s) and business address(es business under the assumed business name. Name Robert & Roshell LeBow	ne: Complete Address
3. The general type of business transacted un Retail Trade ☐ Transportation ☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Robert + Rashell Le Bow 896 W. 150 N	Submit Certificate of Assumed Business Name and \$25.00 fee to:
BlackFoot Id 83221 5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State use only
Signature: Related Bow Printed Name: Robert Le Bow Capacity/Title: Owner (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE 12/23/2009 05:00 CK: 362188 CT: 172899 BH: 1286484 1 0 25.00 = 25.00 ASSUM NAME # 2

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