

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.

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

2014 AUG 22 PM 4: 28

SECRETARY OF STATE

Benton Associates	
The true name(s) and <u>business</u> addres business under the assumed business <u>Name</u> Larry Benton	
3. The general type of business transacte Retail Trade Transporta Wholesale Trade Services Agricultur	ation and Public Utilities tion
Manufacturing Mining Finance, Insurance, and Real Est	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: PO Box 1838 Eagle, ID 83616	Secretary or State
5. Name and address for this acknowledg copy is (if other than # 4 above):	ment
	Secretary of State use only
Signature: Cam 9 Sun 10 Signature: Larry Benton Capacity/Title: Owner	IDAHO SECRETARY OF STATE 08/22/2014 05:00 CK:1693 CT:212877 BH:1438496 16 25.00 = 25.00 ASSUM NAME #
Signature: Printed Name:	D173354

abn.pmd Rev. 07/2010

Capacity/Title: