

CERTIFICATE OF ASSUMED BUSINESS NAMEFILED EFFECTIVE

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

11 JAN 27 PM 1: 36

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

SECRETARY OF STATE STATE OF IDAHO

	Idaho Home	e Environment	
2.	The true name(s) and <u>business</u> address(es business under the assumed business name Name Mame		
3.	The general type of business transacted until Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business	
4.	The name and address to which future correspondence should be addressed: Blake Montgomery 304 S 6th st Ballous Adaho 83313	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
5.	Name and address for this acknowledgmen copy is (if other than # 4 above):	nt	
Signa	ature: Blake Mont	Secretary of State use only	
	ed Name: Blake Montgomery		
Capa	city/Title: Sole Proprietor	IDAHO SECRETARY OF STATE	
Signature:		01/27/2011 05:00 CK: 64 CT: 158010 BH: 1257385	
Printe	ed Name:	1 0 25.00 = 25.00 ASSUM NAME # 2	
Capa	icity/Title:	W144 <i>8</i> 84	