

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

09 OCT 15 AM 8=25

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

MAK D	RYWALL		<del></del>
The true name(s) and business address(es business under the assumed business name.     Name     MARK PRICE	ne:	entity or individual(s) doing  Complete Address  CRIMSON - IDAHO FALLS ID 834	01
3. The general type of business transacted un			
Retail Trade	i and Pu	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301	
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent		
SAME		Secretary of State use only	
Signature: Mark PRICE	g-komptomislabn formitlabn.p66 Revieed 04/2003		
Capacity/Title: OWNER  (see instruction # 8 on back of form)	g.\corp\temi	IDANO SECRETARY 10/15/2009 CK: 17545 CT: 2589	

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