

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

2012 JUL 19 AM 10: 50

SECRETARY OF STAT STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

 The assumed business name which the ubusiness is: BUD'S PO 	OWER SPORTS
2. The true name(s) and <u>business</u> address(e business under the assumed business name Name BUDS SAW SERVICE INC (C186208)	es) of the entity or individual(s) doing
✓ Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining	on and Public Utilities n Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: BUDS SAW SERVICE INC PO BOX 486 COTTONWOOD, ID 83522	Secretary of State 450 North 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): BUDS SAW SERVICE INC PO BOX 486 COTTONWOOD, ID 83522	ent Secretary of State use only
ignature: <u>fuh Yauv</u>	
rinted Name: JOHN LAW	
apacity/Title: SECRETARY	-
gnature:	IDAHO SECRETARY OF STATE 07/19/2012 05:00
rinted Name:	
apacity/Title:	1 0 25.00 = 25.00 ASSUM NAME

abn.pmd Rev. 07/2010

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