

## CERTIFICATE OF ASSUMED BUSINESS NAME

2013 APR 16 AM 9: 03

FILED EFFECTIVE

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

SECRETANI CH STATE STATE OF IDAHO

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

	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:	
	<u>Name</u>	Complete Address
	Crazy Mahoneys LLC	150 Meadows Lane
	(w 118519)	Twin Falls, Idaho 83301
3.	The general type of business transacted und	der the assumed business name is:
	Retail Trade Transportation Wholesale Trade Construction Services Agriculture	and Public Utilities
	☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed:  150 Meadows Lane	Secretary of State 450 North 4th Street PO Box 83720
	Twin Falls, Idaho 83301 208 - 529 - 6253	Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	t

IDAHO SECRETARY OF STATE

24/16/2013 05:00

CK: NO CK # CT: 281989 BH: 1369664

1 8 25.00 = 25.00 ASSUM MAME # 2

D162591

Signature: Joshua

Capacity/Title: Member

Printed Name: Sophia Bates