

Printed Name: _ Capacity/Title: _

CERTIFICATE OF ASSUMED BUSINESS NAME

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

SE

D176443

2015 FEB -2 AM 9: 26

SECRETARY OF STATE STATE OF IDAHO

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

Addington Quetion	72
The true name(s) and <u>business</u> address(establishes business under the assumed business name Name	ne: <u>Complete Address</u>
Shodetree LLC. W123406	31402 Hwy. 18 Parma, ID 83660
Wholesale Trade Construction	nder the assumed business name is: n and Public Utilities
Services	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: 31402 Huy. 18 Rasma, TD. 83660	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	nt
1201	Secretary of State use only
nature: //w// nted Name: Jonathan Addington pacity/Title: / Owner	IDAHO SECRETARY OF STATE 82/03/2015 05:00 CE:1244 CT:305937 BH:14599 10 25:00 = 25:00 ASSUM NAME