CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 JAN -7 PM 3: 59 SECRETARY OF STATE STATE OF IDAHO

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

2. The true name(s) and <u>business</u> address(exbusiness under the assumed business name Name Tyler Layne Melanie Layne	es) of the entity or individual(s) doing me: <u>Complete Address</u> 1411 Falls Ave E; Suite 1137 Twin Falls, ID 83301 1411 Falls Ave E; Suite 1137 Twin Falls, ID 83301
. The general type of business transacted use Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of
The name and address to which future correspondence should be addressed: Tyler Layne 336 Fafnir Dr	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Kimberly, ID 83341 Name and address for this acknowledgment copy is (if other than # 4 above);	nt
ed Name: Tyler Layne acity/Title: owner	Secretary of State use only

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