CERTIFICATE OF ASSUMED BUSINESS NAME

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

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Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

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2. The true name(s) and business address(es) business under the assumed business name	of the entity or individual(s) doing
Name	Complete Address
Daniel Salinas	510 Lake Lowell Rd
	Nampa, ID 83686
3. The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Same as above	der the assumed business name is: and Public Utilities 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
 Name and address for this acknowledgment copy is (if other than # 4 above). Same as above 	
Carrie de above	Secretary of State use only
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ature: (,),	
(signature required)	IDAHO SECRETARY OF STATE SEL 13/2008 05 I

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