

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

2013 JUN -7 AM 8: 57

SECRETARY OF STATE STATE OF IDAHO

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

 The assumed business name which the business is: 	ne undersigned use(s) in the transaction of
Eder's Werks	
The true name(s) and <u>business</u> address business under the assumed business <u>Name</u> Norman Eder	
3. The general type of business transacted Retail Trade Transport Wholesale Trade Construct Services Agricultute Manufacturing Mining Finance, Insurance, and Real Est	tation and Public Utilities ction ure Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Eder's Werks	Secretary of State
500 Crosby Rd. St. Maries, ID 83861-8267	208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	gment
Signature: <i>Novmar</i> Oler	Secretary of State use only
Printed Name: Norman Eder	
Capacity/Title: Owner	IDAHO SECRETARY OF STATE
Signature:	100 01 01 11/07C DIS 13//071
Printed Name:	1 = 25.00 = 25.00 ASSUM NAME # 2
Canacity/Title:	

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