

CERTIFICATE OF ASSUMED BUSINESS NAME

2012 DEC 14 PM 3: 06

SECRETARY OF STATE STATE OF IDAHO

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

Please type or print legibly.

NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Highland Consulting 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address 4980 E. Inverses D 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing 」 Minina **Assumed Business** Name and \$25.00 fee to: Finance, Insurance, and Real Estate 4. The hame and address to which future Secretary of State 700 West Jefferson correspondence should be addressed: Basement West 4980 E. Inverness Dr. PO Box 83720 Boise ID 83720-0080 208 334-2301 5. Name and address for this acknowledgment Phone number (optional): CODY IS (if other than #4 above): Secretary of State use only

Signature:

Printed Name: _____

Capacity/Title: Owner

(see Instruction # 8 on back of form)

ospylamstabn formstabn.p8 Revised04/2003

IDAHO SECRETARY OF STATE
12/14/2012 05:00
CK: 1224672 CT: 172099 BH: 1351510
1 0 25.00 = 25.00 ASSUM NAME # 2

D159776