

Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2017 JUL 24 AM 10: 07

1.	The assumed business nam	e which the undersign	ed use(s) in the transaction of the list
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1): CLYDE SPENCER ORR 8516 S 400 W REXBURG ID 83440		
	(Name)	(Address)	OKG ID 83440
	(Name)	(Address)	
	(Name)	(Address)	
	(Name)	(Address)	
	The general type of busines Retail Trade Wholesale Trade Services Mailing address for future of CLYDE SPENCER ORR (Name) 8516 S 400 W	☐ Construction☒ Agriculture☐ Manufacturing	assumed business name is: Transportation and Public Utilities Mining Finance, Insurance, and Real Estate 5. Name and address for this acknowledgment copy is (if other than # 4): (Name) (Address)
	REXBURG II		
	(City) (S	tate) (Zipcode)	(City) (State) (Zîpcode)
Printed Name: CLYDE SPENCER ORR			Secretary of State use only
Pr	gnature:		IDAHO SECRETARY OF STATE 07/24/2017 05:00 CK:53338 CT:343061 BH:1594879 10 25:00 = 25:00 ASSUM NAME #2
Pri	nted Name:	**************************************	D1424.88

Rev. 08/2015