

Signature: Lua

Printed Name: GERALD B

(see instruction # 6 on back of form)

Capacity/Title:_OWNER

CERTIFICATE OF ASSUMED BUSINESS NAME

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.

SECRETARY OF STATE STATE OF IDAHO

11/15/2013 05:00 CK: 1612734 CT: 172099 BH: 1398176 1 0 25.00 = 25.00 ASSUM NAME # 2

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2013 NOV 15 AM 8: 52

The assumed business name which the under business is: Consulting and Project	Management
The true name(s) and business address(es) business under the assumed business name Name GERALD BLATTER	Complete Address 708 WEST 5 STREET
	SHOSHONE, IDAHO
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:	Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720
SERALD BLATTER 768 WESTS STREET SHOSHOWE, I.D. 83352	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above).	Secretary of State Use only
	Secretary of State 552 5013