

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2013 APR 23 AM 9: 11

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

SECRETARY OF STATE: STATE OF IDAHO

The true name(s) and <u>business</u> addres business under the assumed business Name	name:
Jason Steffen	Complete Address 7544 Wells Street, Bonners Ferry, ID 83805
3. The general type of business transacte Retail Trade Transport Wholesale Trade Construct	ation and Public Utilities
Services Agricultur Manufacturing Mining Finance, Insurance, and Real Es	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Jason Steffen 7544 Wells Street, Bonners Ferry, ID 83805	I Secretary of State I
5. Name and address for this acknowledge copy is (if other than # 4 above):	208 334-2301 gment
	Secretary of State use only
Signature: Signature: Jason Steffen Capacity/Title: Owner	_ .
Signature: Printed Name: Capacity/Title:	IDAHO SECRETARY OF STATE 94/23/2013 95:00 CK: 581 CT: 282272 BH: 1370704 1 8 25.00 = 25.00 ASSUM HAME # 2

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