

Capacity/Title: Coner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned MO! -7 MINO: 16 submits for filing a certificate of Assumption submits for filing a certificate of Assumed Business Name.

| submits for filing a certificate of Assumed Business Please type or print legibly. NOTE: See instructions on reverse before filing | gotevik (j. 5.69 |
|---|---|
| The assumed business name which the undersigned use(s) in the transaction of business is: Marrs = Lectric | |
| 2. The true name(s) and business address(es) of the business under the assumed business name: Name Scott Marrs /52 | e entity or individual(s) doing Complete Address 21 W. Gaines Cf, Nampa Id. 83686 |
| 3. The general type of business transacted under the Retail Trade Transportation and P Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate | |
| 4. The name and address to which future correspondence should be addressed: Scott Warrs 1521 W. Gaines Ct. Nampa, Edaho 83686 | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| Name and address for this acknowledgment copy is (if other than # 4 above). | Phone number (optional): 407-2698 |
| | Secretary of State use only |
| gnature: 100 (signature required) South Marks South Marks | I BAUG OF DROWN |

IDAHO SECRETARY OF STATE

11/07/2005 05:00

CK: 91 CT: 158010 BH: 920978
1 @ 25.00 = 25.00 ASSUM NAME # 2

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