

## **CERTIFICATE OF** ASSUMED BUSINESS NAME ! I NOV 30 AM 8: 54

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

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

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STATE OF	10450

business under the assumed business name: Name    Name   Complete Address	P1 ENTERPRISES		
MPS LLC    W 3687	business under the assumed business	name:	
Retail Trade			
Retail Trade		4294 GRAY TEAL CT. EAGLE, ID 83616	
Wholesale Trade	W 3681		
Retail Trade			
Retail Trade	The general type of business transacter	d under the assumed husiness name is:	
Wholesale Trade			
Agriculture  Manufacturing Mining Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:  MPS LLC  4294 GRAY TEAL CT.  EAGLE, ID 83616  Name and address for this acknowledgment copy is (if other than #4 above):  Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301  Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301  Secretary of State use only			
Manufacturing Mining Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:  MPS LLC  4294 GRAY TEAL CT.  EAGLE, ID 83616  Name and address for this acknowledgment copy is (if other than # 4 above):  Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301  Secretary of State use only			
Assumed Business Name and \$25.00 fee to:  The name and address to which future correspondence should be addressed:  MPS LLC  4294 GRAY TEAL CT.  EAGLE, ID 83616  Name and address for this acknowledgment copy is (if other than #4 above):  Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301  Secretary of State use only	Services Agricultur		
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208 334-2301  EAGLE, ID 83616  Name and address for this acknowledgment copy is (if other than # 4 above):  Secretary of State use only nature:  Place Name: RICHARD BUTLER  Dacity/Title: MANAGER	MPS LLC		
EAGLE, ID 83616  Name and address for this acknowledgment copy is (if other than # 4 above):  Secretary of State use only atted Name: RICHARD BUTLER  Dacity/Title: MANAGER	4294 GRAY TEAL CT.		
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