http://www.sos.idaho.gov/corp/acro4/abr.

CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

FILED EFFECTIVE

2013 MAR 20 AM 8: 10

SECRETARY WATE

submits for filing a certificate of Assu	JMed Business Name. STATE OF IDAHO Day - Company C
Please type or print legi	bly.
Instructions are included on back	of application.
1. The assumed business name which to business is: Buckaroo Bunny	the undersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address under the assumed business Name Nichola Griggs Lisa metralk	ess(es) of the entity or individual(s) doing so name: Complete Address 1343 Meininger Rd Marsing Id 93439 7214 Opaline Rd Melba Id 83441
	ure Submit Certificate of Assumed Business
4. The name and address to which futur correspondence should be addressed Nicholi Griggs 7343 Meininger Ed Marsing #4 83439	e Secretary of State
5. Name and address for this acknowled copy is (if other than # 4 above):	igment
	Secretary of State use only
Signature: Nichde Griges	
Printed Name: Nichole Griggs	
Capacity/Title: Partner	
Signature:	IDAHO SECRETARY OF STATE 03/20/2013 05:00
Printed Name: CISA MIETCALF	CK: 1328843 CT: 172099 BH: 1365446 1 8 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title: PARTIUE P	_ ~

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