

CERTIFICATE OF ASSUMED BUSINESS NAME

2013 MAY 13 AM 9: 14

FILED EFFECTIVE

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

SECRETARIT OF STATE STATE OF IDEHO

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

| 2. The true name(s) and <u>business</u> address | |
|---|--|
| business under the assumed business r Name | name: <u>Complete Address</u> |
| Raymond Cruz | 4909 Asbury Way, Caldwell, ID 83607 |
| | |
| 3. The general type of business transacted | I under the assumed business name is: |
| Retail Trade Transportate Wholesale Trade Construction Services Agriculture | |
| ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Esta | Submit Certificate of Assumed Business |
| The name and address to which future correspondence should be addressed: Raymond Cruz | Secretary of State 450 North 4th Street PO Box 83720 |
| 4909 Asbury Way, Caldwell, ID 83607 | Boise ID 83720-0080 - 208 334-2301 |
| 5. Name and address for this acknowledgr copy is (if other than # 4 above): Raymond Cruz | nent |
| 4909 Asbury Way, Caldwell, ID 83607 | - - |
| | Secretary of State use only |
| gnature: Lymond Com | |
| inted Name: Raymond Cruz | |
| apacity/Title: Owner | _ |

IDAHO SECRETARY OF STATE

95/13/2013 95:99

CK: 284736489372 CT: 158010 BH: 1373478

1 8 25.98 = 25.98 ASSUM NAME # 2

Signature:

Printed Name: ____ Capacity/Title: ____