

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 08 AUG - I PM I= 10 THE

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF STATE STATE OF IDAHO

 The assumed business name which the unc business is: 	dersigned (use(s) in the tran	saction of	
Day Power Media				
LICYTHUBY WEOLG				
The true name(s) and business address(es) business under the assumed business name			,	·
Name	Complete Address			
Ubraid L. Lby		Denise St.	/	
Aletia L. Pointes	900E.	Denise St.	Boise,	110 83706
				
3. The general type of business transacted un	der the as	sumed business	name is:	
Transportation	and Dubli			
Retail Trade Transportation Wholesale Trade Construction	and Publi	C Utilities		
Wholesale Trade Construction Services Agriculture				7
☐ Manufacturing ☐ Mining		Submit Certifica Assumed Busin		
Finance, Insurance, and Real Estate		Name and \$25.0		
4. The name and address to which future		Idaho Secretary o	f State	
correspondence should be addressed:		450 N 4th Street	Glato	
Danald / No. VI		PO Box 83720 Boise ID 83720-00	080	
900 E. Denise St		(208) 334-2301		
Boise 10 83706		(200) 00 / 200 !		
	4			
Name and address for this acknowledgme copy is (if other than # 4 above):	nt			
55 F , 10 (1.510) 5 mm, 1.550, 1.57				
		Secretary of	State use only	· · · · · · · · · · · · · · · · · · ·
4		occiously or	State use only	
M - D	m.p65			
Signature: (signature required)	orms/et			
Printed Name: Aletia Powers	g.koorpiformstabn formstabn.p65 Revised 04/2003			
Capacity/Title: fartrus	Revi	9 87	AHO SECRETAR 01/200	8 Ø5.00
(see instruction # 8 on back of form)	δ, is	CK: 151 1 2 25.(7 CT: 22844	7 BH: 1129875 ASSUM NAME # 2