

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2014 SEP 24 AM 8: 36

SECRETARY OF STATE STATE OF IDAHO

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

2. The true name(s) and <u>business</u> address(es business under the assumed business named).	s) of the entity or individual(s) doing ne:
Name	Complete Address
Craig F. Webber	11165 Tioga Street
	30152, ID 83709
3. The general type of business transacted un	
Retail Trade Transportation Wholesale Trade Construction	and Public Utilities
Services Agriculture	<u></u>
☐ Manufacturing ☐ Mining	Submit Certificate of
	Assumed Business
☐ Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
Craic F. Webber	PO Box 83720
11165 Tiosa Street	Boise ID 83720-0080
	208 334-2301
Baise + 2 83709	
5. Name and address for this acknowledgmer	nt
copy is (if other than # 4 above):	
N/A	
	Secretary of State use only
Signature: Constitution	
	IDAHO SECRETARY OF STATE
Printed Name: Conie Tushour	09/24/2014 05:00
Capacity/Title:	CK:2158 CT:107788 BH:144253
Signature:	10 25.00 = 25.00 ASSUM NAME

0173924

Printed Name:

Capacity/Title: