

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

Instructions are included on back of application.

2014 MAY 27 AM 10: 09

SECRETATY OF STATE STATE OF GAHO

Instructions are included on back of applic	eation.
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Squive Elviron	of the entity or individual(s) doing : <u>Complete Address</u> 1280 E Shaveus Loop Nampa (d.8368)
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:	Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State use only
inted Name:	IDAHO SECRETARY OF STATE 05/27/2014 05:00 CK:164800837 CT:158010 BH:1426 16 25:00 = 25:00 ASSUM NAME
inted Name:	Old Ulas
apacity/Title:	D171467

abn.pmd Rev 07/2010