

## 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.

12 APR 10 AM 10: 27 SECRETARY OF STATE STATE OF IDAHO

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

1.	The assumed business name which the undebusiness is:	<b>C</b>
	AA STRAIGHT LINE PAIL	VTING
2.		
3.	The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	ler the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed:  1301 N WALES AVE  MERIOIAN ID 83642	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):	
	ture: MCHANES HURENOVIC	Secretary of State use only
	city/Title: OUNEL	IDANO SECRETARY OF STATE
Signature:		04/10/2012 05:00 CK: CASH CT: 158010 BH: 1319163
Printe	d Name:	1 8 25.00 = 25.00 ASSUM MANE # 2
Capacity/Title:		D154731

abn.pmd Rev. 07/2010