



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2012 SEP 13 PM 3: 50

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 unbusiness is: | dersigned | l use(s) in the transaction of |
|-------|---|-----------|---|
| | ALOFT LEADERSHIP ACADEMY | | |
| 2. | The true name(s) and <u>business</u> address(es business under the assumed business name Name IDAHO MW LLC WLITZUY | , , , | |
| 3. | The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture | | |
| | Manufacturing Mining Finance, Insurance, and Real Estate | | Submit Certificate of Assumed Business Name and \$25.00 fee to: |
| 4. | The name and address to which future correspondence should be addressed: PO BOX 690 EMMETT IDAHO 83617 | | Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| 5. | Name and address for this acknowledgmer copy is (if other than # 4 above): | ıt . | |
| Signa | ture: SQU'U | | Secretary of State use only |
| = | d Name: SEAN MERRILL | | |
| Capa | city/Title: MANAGING MEMBER | | |
| Signa | | | IDAHO SECRETARY OF STATE |
| _ | d Name: JASON WOOD | | 09/13/2012 05:00 CK: 1131877 CT: 172099 BH: 1339729 1 8 25.00 = 25.00 ASSUM NAME # 3 |
| | city/Title: MANAGING MEMBER | | |

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