

CERTIFICATE OF ASSUMED BUSINESS NAME DIRECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name(1) 101-12

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

STATE OF TOAHO

1. The assumed business name which the unde business is:	•
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name (マスト モソマーレーン (ゴセリ しゅら)	
3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
157 M. Hannah Pl Star, ID 83669 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
Signature: (sgrature required)	Secretary of State use only Comparison of State use only
Printed Name: Jeff Graviat Capacity/Title: Co-Owner	CK: 1209738 CT: 172099 BH: 1865265 1 8 25.08 = 25.08 ASSUM NAME # 3