

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.

FILED EFFECTIVE

2013 NOV 13 AM 11: 20

SECRETARY OF STATE STATE OF IDAHO

167035

business is: McCall E-Z Wrap 2. The true name(s) and business address((es) of the entity or individual(s) doing
business under the assumed business not share AlexB. Growth, LLC W_{l02205}	ame: <u>Complete Address</u> PO Box 810, McCall, ID. 83638
	420 Wilhelm Cr. Ct., McCall, ID. 83638
Wholesale Trade Construction	ion and Public Utilities on
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: McCall E-Z Wrap PO Box 810	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
McCall ID 83638 5. Name and address for this acknowledgm	
COPY is (if other than # 4 above):	Secretary of State use only
Signature:	- October y Gr Galler use only
Capacity/Title: Manager Signature:	IDAHO SECRETARY OF STATE - 11/13/2013 05:00
Printed Name:	CK: 1610149 CT: 172099 BH: 1397799 1 25.00 = 25.00 ASSUM NAME # 3