Printed Name: Milton

Capacity/Title: Owner

(see instruction # 8 on back of form)

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. 2007 APR -4 AM 8:41

Please type or print legibly. 10. 10.1.1.11 Plantage 1.

SECRETARY OF STATE STATE OF IDAHO

NOTE: See instructions on reverse before filing.

| Grizz Siding | |
|--|-------------------------------------|
| The true name(s) and business address(es) of the business under the assumed business name: | ne entity or individual(s) doing |
| Name | Complete Address |
| Milton DWing 10 | 132 NC & Shoare rd & Hans |
| | 83854 |
| | |
| | |
| The general type of business transacted under the | ne assumed business name is: |
| Detail Tends Transportation and | Distribution di fattitatione |
| Retail Trade Transportation and | Public Utilities |
| ☐ Wholesale Trade ☐ Construction ☐ Agriculture | |
| | Submit Certificate of |
| ☐ Manufacturing ☐ Mining | Assumed Business |
| Finance, Insurance, and Real Estate | Name and \$25.00 fee to: |
| The name and address to which future | Secretary of State |
| correspondence should be addressed: | 700 West Jefferson |
| Milton O Wine | Basement West |
| | PO Box 83720 |
| 10132 NCLiPhouserd th | Boise ID 83720-0080 208 334-2301 |
| Transcr Id 83854 | 200 334-2301 |
| Name and address for this palmout. | Phono number (|
| Name and address for this acknowledgment | Phone number (optional): |
| CODY IS 15 other than # 4 about? | 208 641 8453 |
| CODY IS (if other than # 4 above): | |
| COpy is (if other than # 4 above): | |

IDAHO SECRETARY OF STATE

04/04/2007 05:00

X: 2514 CT: 158010 BH: 1844764

2 25.00 = 25.00 ASSUM NAME # 2

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