

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

FILED EFFECTIVE

2014 NOV 12 AM 6: 53

SECRETARY OF STATE OF IDAHO

submits for filing a certificate of Assumed Business Name. Please type or print legibly.

Instructions are included on back of application.

GREEN-MAX	
. The true name(s) and <u>business</u> a business under the assumed bus	address(es) of the entity or individual(s) doing siness name:
<u>Name</u>	Complete Address
TYLER K WINKOWITSCH	34797 N LIMEKILN RD
	BLANCHARD, ID 83803
The manual hour of builting	manufact and a the manufact transfer of the same of th
	nsacted under the assumed business name is:
=	nsportation and Public Utilities
Wholesale Trade Cor	nstruction
Services Agr	riculture
Manufacturing Min	ning Submit Certificate of
Finance, Insurance, and Ro	Assumed Business eal Estate Name and \$25.00 fee to:
indirec, modianec, and tw	Name and \$25.00 lee to:
. The name and address to which	3 Secretary of State
correspondence should be addre	essed: 450 North 4th Street
TYLER K WINKOWITSCH	PO Box 83720
PO BOX 2466	Boise ID 83720-0080 208 334-2301
HAYDEN, ID 83835	208 334-2301
. Name and address for this acknowledge	owledament
COPY IS (if other than # 4 above):	
	Secretary of State year b.
	Secretary of State use only
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ature: 1/1 = ted Name: TYLER K WINKOWITSCH	Secretary of State use only IDANO SECRETARY OF STA 11/12/2014 05:0

CK:165797 CT:150538 BH:1448931 16 25.00 = 25.00 ASSUM NAME #2

D174915

Signature: __

Printed Name: ___

Capacity/Title:__