

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

SECRETARY OF STATE

Please type or print legibly. Instructions are included on back of application.

 The assumed business name which the ι business is: 	undersigned use(s) in the transaction of
Stibal Custom Spirits	
2. The true name(s) and <u>business</u> address(e business under the assumed business na <u>Name</u> Lantrix LLC W 22-189	· · · · · · · · · · · · · · · · · · ·
3. The general type of business transacted Retail Trade Transportation Wholesale Trade Construction Services Agriculture	on and Public Utilities
Manufacturing Mining Finance, Insurance, and Real Estat	Submit Certificate of Assumed Business te Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Stibal Custom Spirits 24509 Rudd Road	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
Parma Idaho 83660	208 334-2301
5. Name and address for this acknowledgm copy is (if other than # 4 above):	ent
	Secretary of State use only
Signature: St	
Printed Name: John W Stibal	05/14/2015 05:00
Capacity/Title: Owner	- CK:503 CT:306524 BH:1475556 1C 25.00 = 25.00 ASSUM NAME #
Signature:	The state of the s
Printed Name: Capacity/Title:	D179016

abri.pmd Rev. 07/2010