

CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 OCT 10 AM 8:-26

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

WEBSO	DURCE
The true name(s) and business address(es) business under the assumed business name Name Stephen R. Carlson	of the entity or individual(s) doing : Complete Address P.O. Box 159 Troy, ID 83871
3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction	er the assumed business name is:
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: WEBSOURCE	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
Stephen R. Carlson P.O. Box 159 Troy, ID 83871	(208) 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	
	Secretary of State use only
Signature: Supplie Rollson (signature required)	IDAHO SECRETARY OF STATE 10/10/2008 05:00 CK: 4116 CT: 94831 BH: 139595 1 0 25.00 = 25.00 OCCUM 149255
Printed Name: Stephen R. Carlson	IDAHO SECRETARY OF STATE
Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 10/10/2008 05:00 CK: 4116 CT: 94831 BH: 1139595 1 8 25.80 = 25.80 ASSUM NAME #

DISTIBS