

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

09 MAY 21 AM 8:49

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

| SECURE MINI S | STORAGE |
|---|---|
| The true name(s) and business address(es) of business under the assumed business name: Name RALPH AHLEFELD ARDITH AHLEFELD | f the entity or individual(s) doing Complete Address 13932 E. RIVER RD PRIEST RIVER, ID 83856 |
| The general type of business transacted under | r the assumed business name is: |
| Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: RALPH AHLEFELD P.O. BOX 181 COOLIN, ID 83821 Name and address for this acknowledgment copy is (if other than #4 above): | Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301 |
| | Secretary of State use only |
| ted Name:OWNER_ (see instruction # 8 on back of form) | IDAHO SECRETARY OF STATE ################################## |

D130894