

CERTIFICATE OF ASSUMED BUSINESS NAME TO JAN 22 AM 8: 35

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

SIATE OF IDAHO

Please type or print legibly.

The assumed business name which the undersigned use(s) in the transaction of business is: ACROSTRESS	
2. The true name(s) and business address(est business under the assumed business name Name Tohn Davin MEEK	
3. The general type of business transacted up Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: ACAOSTRESS ZIYY Hakland Skript Rosel 5. Name and address for this acknowledgm copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
gnature: Multiple (signature required) rinted Name: John MEEK apacity/Title: Sole MoRIETAL (see instruction # 8 on back of form)	Secretary of State use only 100000000000000000000000000000000000