

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

12 HAY 24 PH 12: 23

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

SECRETARY OF STATE STATE OF IDAHO

D155838

The assumed business name which the und business is:	
- Recovery Resolut	ion Specialists
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Chr3 Maze	of the entity or individual(s) doing
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture	der the assumed business name is: and Public Utilities
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Some as #2	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	t
	Secretary of State use only
Signature:	
Printed Name: <u>Chris Maze</u>	
Capacity/Title: Cwner	IDANO SECRETARY OF STATE
Signature: Printed Name:	CK: COSH CT: 158018 RH: 1325567
Capacity/Title:	1 0 25.00 = 25.00 ASSUM NAME N 2

abn.pmd Rev. 07/2010