

CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 FEB 23 AM 8: 18

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the unbusiness is:	undersigned use(s) in the transaction of
2. The true name(s) and business address(e business under the assumed business name Name Clifford L. Metcalf	, , , , , , , , , , , , , , , , , , ,
	on and Public Utilities
 ✓ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ✓ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Oiff Metcalf	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
217 Blaine Street Caldwell, Idaho 83605	(208) 334-2301
 Name and address for this acknowledgm copy is (if other than #4 above). 	nent
	Secretary of State use only
Signature: Clifford L. Metcalf Printed Name: Clifford L. Metcalf	- 88
Capacity/Title: Owner (see instruction # 8 on back of form)	02/23/2010 05:00 CK: 2151 CT: 158610 BH: 129323 1 9 25.00 = 25.00 ASSUM NAME 1