

Capacity/Title:___

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.

2014 MAY -9 PM 3: 49

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

SECRETARY OF STATE STATE OF IDAHO

 The assumed business name which the business is: Harris Creek M.M. Pa 	
2. The true name(s) and business address business under the assumed business name Name Rex Beaver Jolene Beaver ———————————————————————————————————	Complete Address P.O. Box 140518 Garden City, ID Same 83714
3. The general type of business transacted Retail Trade Transportat Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	stion and Public Utilities Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Rex Beaver P.O. Box 140518 Garden City, ID, 83714	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	-
Signature:	Secretary of State use only IDAHO SECRETARY OF STATE 05/09/2014 05:00 CK:1034 CT:158010 BH:1424177 10 25.00 = 25.00 ASSUM NAME #2
Printed Name:	D1101100

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