| CERTIFICATE OF ASSUMED BU (Please type or print legibly. See instruction)   | SINESS NAME ns on reverse.)  |
|---|--|
| To the SECRETARY OF STATE, STATE OF IDAH Pursuant to Section 53-504, Idaho Code, the gives notice of adoption of an Assumed Bus | undersigned<br>ness Name. State 16.50 STATE  |
| The assumed business name which the undersigned us business is:      Straight Talk  A   |  |
| The true name(s) and business address(es) of the entit business under the assumed business name is/are:                         | y or individual(s) doing   |
| <u>Name</u> <u>Co</u>   | mplete Address   |
| Kenneth & Mayfield Pist   | WRIVERVIEW FAILS ID 83854  |
| Kenneth & Mayfield Pist<br>Trupy A Mayfield   | Same   |
| 3. The general type of business transacted under the assu   | med business name is:  |
| ☐ Wholesale Trade ☐ Agriculture ☐ Fin   | nsportation and Public Utilities<br>ance, Insurance, and Real Estate<br>ing                                      |
| correspondence should be addressed:   | (optional): <u>208 773 722</u> 8   |
| Renneth & Mayfield<br>11113 W Riverview Dr<br>Post Falls 1D 83854   | Submit Certificate of<br>Assumed Business<br>Name and <b>\$20.00</b> fee to:                                     |
| <ul> <li>Post Fulls 1D 83854</li> <li>5. Name and address for this acknowledgment copy is (if other than #4 above):</li> </ul>  | Secretary of State<br>700 West Jefferson<br>Basement West<br>PO Box 83720<br>Boise ID 83720-0080<br>208 334-2301 |
| 12/39   | Secretary of State use only  |
| Signature: Kenneth & Mindfeld   |  |
| Printed Name: Kenneth G Wayfiel d  Capacity: Sole Proprietor  (see instruction # 8 on back of form)                             | IDAHO SECRETARY OF STATE  23/06/2002 05:00  CK: 1007 CT: 158165 BH: 450224  1 2 20.00 = 20.00 ASSUM NAME # 2     |
| (see instruction # 8 on back of form)   | D52663   |