

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2013 OCT 10 AM 9: 36

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

 The assumed business name which the undersigned use(s) in the transaction of business is: 	
	INANCIAL MANAGEMENT
Wholesale Trade Construction	der the assumed business name is: and Public Utilities
Services Agriculture 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: MIHAELA EVANS 9323 N. GOVERNHENT WAY, #31 HAYDEN, ID 83535	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	ıt
ignature: MIHAELA EVANS apacity/Title: OWNEY	Secretary of State use only
signature:	IDAHO SECRETARY OF STATE 10/10/2013 05:00 CX: 18 25 98 - 25 98 00000000000000000000000000000000000

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Capacity/Title: