



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.

2012 DEC 18 PM 1:45

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

THE NATURAL TURN

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

WBE RENTALS, LLC

(W 19345)

Complete Address

541 BRIARCLIFF DRIVE, TWIN FALLS, ID 83301

3. The general type of business transacted under the assumed business name is:

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

THE NATURAL TURN

541 BRIARCLIFF DRIVE

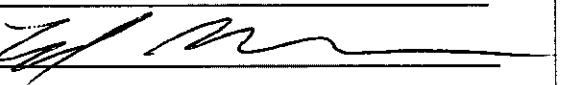
TWIN FALLS, ID 83301

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

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):

Secretary of State use only

Signature: 

Printed Name: EARL WILLIAMSON

Capacity/Title: OWNER

Signature: 

Printed Name: BARBARA WILLIAMSON

Capacity/Title: OWNER

IDAHO SECRETARY OF STATE
12/19/2012 05:00
CK: 1609 CT: 206195 BH: 1352031
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 159849