CERTIFICATE OF ASSUMED BUSINESS NAME

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

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

FILED EFFECTIVE

11 MAR -2 AM 8: 11

SECRETARY OF STATE STATE OF IDAHO

DELTA	R RANCH
The true name(s) and <u>business</u> address(es business under the assumed business nar <u>Name</u>	ne: <u>Complete Address</u>
RALPH REAVIS	432 SO. 11TH AVE POCATELLO ID 83201
3. The general type of business transacted u	nder the assumed business name is:
 □ Retail Trade □ Wholesale Trade □ Construction □ Services □ Agriculture 	n and Public Utilities
ManufacturingMiningFinance, Insurance, and Real Estate	Assumed Business
 The name and address to which future correspondence should be addressed: RALPH REAVIS 	Secretary of State 450 North 4th Street PO Box 83720
6400 S MARSH CREEK RD MCCAMMON ID 83250	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
	Secretary of State use only
gnature: Kolph G. Kearn	
nted Name: RALPH REAVIS	
apacity/Title: OWNER	
gnature:	IDAHO SECRETARY OF STATE 03/02/2011 05:00
rinted Name:apacity/Title:	CK: 522282 CT: 158818 BH: 12622 1 0 25.08 = 25.00 ASSUM MAME

abn.pmd Rev. 07/2010