

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

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submits for filing a certificate of Assumed Business Name. 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: **Bottle Stop** 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name 532 South Bridge, St. Anthony, ID 83445 MWS Enterprises, LLC W108440) 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Services Submit Certificate of Manufacturing Mining Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street PO Box 83720 Allied Financial Services, PLLC Boise ID 83720-0080 P.O. Box 674 208 334-2301 Rexburg, ID 83440 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): Secretary of State use only Printed Name: Melanee Speth Capacity/Title: Member, MWS Enterprises, LLC Signature: IDAHO SECRETARY OF STATE Printed Name: _ Capacity/Title:__

11/18/2011 05:00 CK: 835178 CT: 172099 BH: 1298692 1 0 25.00 = 25.00 ASSUM NAME # (