Capacity: Owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) E JUST To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Arrowrock Flooring 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name R Boucher 1ewis 6950 Ironwood St. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): ______ correspondence should be addressed: Lewis Boucher Submit Certificate of Assumed Business 6950 Ironwood St. Name and \$20.00 fee to: Boise ID 83709 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 -Sacretary engine 89/38/1999 89:88 CK: 1147 CT: 121283 BH: 254246 1 0 20.00 = 20.00 ASSUM NAME # 2 Signature/_ Printed Name: Lewis Boucher D29648