

CERTIFICATE OF ASSUMED BUSINESS NAME 2014 JUL -2 AM 8: 39

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

submits for filing a certificate of Assumed Business Name. CEOPETANY OF STATE Please type or print legibly. Functions are included on back of application. Instructions are included on back of application.

2. The true name(s) and <u>business</u> add business under the assumed busin		entity or individual(s) doing	
<u>Name</u>		Complete Address	
Margo Kay	3820 HW	3820 HWY 8	
	Troy ID, 8	Troy ID, 83871	
Wholesale Trade Const Services Agrice Manufacturing Mining Finance, Insurance, and Rea I. The name and address to which fut correspondence should be address	g I Estate ture	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street	
Margo Kay		PO Box 83720 Boise ID 83720-0080	
3820 HWY 8		208 334-2301	
Troy ID 83871 5. Name and address for this acknowl copy is (if other than # 4 above):	edgment		
Tisasseet		Secretary of State use only	
nature: // Wyce / / / / / / / / / / / / / / / / / / /		IDAHO SECRETARY OF S	

07/02/2014 05:00

CK: 2391 CT: 158010 BH: 1431596 1@ 25.00 = 25.00 ASSUM NAME #2

D172327

Capacity/Title: Owner

Signature: ____

Printed Name: ___ Capacity/Title: