

CERTIFICATE OF ASSUMED BUSINESS NAME

11 JAN 26 AM 8: 27

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

SECRET BY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

| 2. The true name(s) and business address business under the assumed business Name Lonny Taylor | name: Complete Address 25 South 1050 E Dech |
|---|---|
| . The general type of business transacte | d under the assumed husiness name is: |
| Retail Trade Transporta | ation and Public Utilities |
| ☐ Wholesale Trade ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Est | Submit Certificate of Assumed Business |
| The name and address to which future correspondence should be addressed: | Secretary of State 700 West Jefferson Basement West |
| 10 nny Taylor 25 South 1050 East Declo ID 83327 | PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| Name and address for this acknowledg copy is (if other than # 4 above): | ment Phone number (optional): |
| | Secretary of State use only |