

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2013 APR 10 AM 9: 30

SECRETARY OF STATE STATE OF IDAHO

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

ame:
Complete Address
2016 E Harbour Grave Dr
Nampa 1D 83686
under the assumed business name is: on and Public Utilities
n
Submit Certificate of Assumed Business
te Name and \$25.00 fee to:
Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080 208 334-2301
ent
Secretary of State use only
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IDAHO SECRETARY OF STATE

04/10/2013 05:08

CK: 2069 CT: 281710 BH: 1368720
1 0 25.00 = 25.00 ASSUM NAME # 2

D 162433

Capacity/Title: OWNEX

Signature:

Printed Name: ___ Capacity/Title: ___