S

Capacity/Title:



## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

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

## FILED EFFECTIVE

2014 AUG 1 44 AM 11: 52

SECRETARY OF STATE

	SIMIL OF TOTAL
The assumed business name which the unders business is:	signed use(s) in the transaction of
<u>Ventive</u>	
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  Diabase LLC  4	the entity or individual(s) doing <u>Complete Address</u> 188 East Lake Kin LN
W141176	Bose, ID 83716
3. The general type of business transacted under  Retail Trade Transportation and Wholesale Trade Construction	
Services	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
gnature:	IDAHO SECRETARY OF STATE
inted Name: <u>Jora than Cavolla</u> apacity/Title: Member	08/14/2014 05:00 CK:2120 CT:300089 BH:143734 10 25:00 = 25:00 ASSUM NAME
gnature:	
rinted Name:	D 173175

abn.pmd Rev. 07/2010