CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

| (<u>*</u> | Pursuant to Section 53-504, Id gives notice of adoption of an | Assumed Business Name | |
|------------|---|---|--|
| 1. | The assumed business name which the ubusiness is: | undersigned use(s) in the transaction of | |
| | SPANEENDERS DRYWAII | | |
| 2. | The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: | | |
| | Name | Complete Address | |
| | JAY D. Spangerbeeg | 204 wild Flowers NAMPA ID 83686 | |
| | Civoly S. Spangenberg | 2104 wild Flower St. NAMPA ID 8.3686 | |
| 3, | The general type of business transacted under the assumed business name is: (mark only those that apply) | | |
| | ☐ Retail Trade ☐ Wholesale Trade ☐ Services ☐ Construction | Finance, Insurance, and Real Estate on Mining | |
| 4. | The name and address to which future Phone number (optional): (208)467~0017 correspondence should be addressed: | | |
| | Springenberg Drywnil 2104 wild Flower St. | Submit Certificate of Assumed Business Name and \$20.00 fee to: | |
| | NAMPA TD. 83686 | Secretary of State 700 West Jefferson | |
| 5. | Name and address for this acknowledgm copy is (if other than # 4 above): | Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 | |
| | | Secretary of State use only | |
| | A | IDAHO SECRETARY OF STATE 94/19/19/9 69:66 CK: 1815 CT: 114299 BH: 288569 | |
| matu | ire: fay 1. pargenlary | | |
| | AND SOUNDS | 1 @ 20.00 = 20.00 ASSUM NAME # 2 | |

Sig

Printed Name: JAY D. Spangenberg

Capacity: owner/presid

(see instruction # 8 on back of form)

D25202