

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE
2012 OCT 24 AM 8: 45

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

SECRETARY OF STATE STATE OF IDAHO

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

1. The assumed business name which the undersigned use(s) in the transaction of business is: Fair Isle Fibers 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name Cassie Paredes 12 East Main Rexburg ID 83440 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade | Construction Agriculture Services Submit Certificate of Manufacturing Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street PO Box 83720 Cassie Paredes Boise ID 83720-0080 38 W Main St #2 208 334-2301 Saint Anthony ID, 83445 5. Name and address for this acknowledgment CODY IS (if other than # 4 above). Secretary of State use only Signature: Cassie Reseales Printed Name: Cassie Paredes Capacity/Title:_____ IDAHO SECRETARY OF STATE
10/24/2012 05:00
CK: 1836 CT: 259762 BH: 1344882
18 25.08 = 25.08 ASSUM NAME N 2 Signature: Printed Name:

D158876

Capacity/Title: