

9/21/2012

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 2015 MAY 26 AM 9: 53

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersigned business is:	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Benjamin Roach 344	entity or individual(s) doing Complete Address COBBLISTING LN. W FallS ID 83404-7252
3. The general type of business transacted under the Retail Trade Transportation and Put Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	I I
4. The name and address to which future correspondence should be addressed: Benjamin ROACN 3440 Obbiestone Ln- Haho Falls ID 83404-7252	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above);	
Signature:	Secretary of State use only
Printed Name: Bon Roach Capacity/Title: DWNUP Signature: Printed Name:	IDAHO SECRETARY OF STATE 05/27/2015 05:00 CK:566438 CT:158010 BH:1477067 10 25:00 = 25:00 ASSUM NAME #2
Capacity/Title:abnpmd Rev 07/2010	D179286