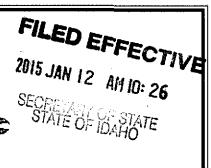


## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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.





1. The assumed business name which the undersigned use(s) in the transaction of business is:  Rebertson's Rock	
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  Marion E Robertson	Complete Address
3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining	er the assumed business name is:  nd Public Utilities  Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Marion E Robertson 874 Red Fir Rob Kors Kia FD 83539	Name and \$25.00 fee to:  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):  Same	10460 SECRETARY OF STATE 01/13/2015 05:00  CK: 1546 or 5548010 or 1456857 16 25:00 = 25:00 ASSUM NAME #2
Signature Marion Elator	16 25.00 = 25.00 ASSUM NAME #2
Printed Name: Marion E Robertsen	
Capacity/Title: Own &	
Signature:	
Printed Name:	D175991
Capacity/Title:	