

Capacity/Title: Vice President

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 APR 23 AM 9: 07

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

FILED EFFECTIVE

d use(s) in the transaction of
entity or individual(s) doing Complete Address 3 N, CONEYMMENT Hayden J. CONEYMMENT Hayden Hayden 10 83
assumed business name is:
Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
Secretary of State use only O 2110 (IDANO SECRETARY OF STATE

CK: 1001 CT: 225241 BH: 1111482 1 0 25.00 = 25.00 ASSUM NAME # 2