

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 OCT 21 AM 8: 26

SECRETARY OF STATE

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

1. The assumed business name which the up business is:  Dicty Ratz AU	
2. The true name(s) and <u>business</u> address(e business under the assumed business na Name  Chris Mickas  Eleana Mickas	
3. The general type of business transacted of Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  Chris & Eleana mickes  3375 N. Hirthen Ave  Touise Tol 83715	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above);	
Signature: Mr. Vas  Printed Name: Chris Mic Vas  Capacity/Title: Owner / manager  Signature: Chris Mic Vas  Signature: Chris Mic Vas  Signature: Chris Mic Vas	Secretary of State use only  IDAHO SECRETARY OF STATE  10/21/2014 05:00  CK:1518 CT:158010 BH:1446082  16 25.00 = 25.00 ASSUM NAME #

abn.pmd Rev. 07/2010

N 17111107

Printed Name: Elean Cimickas

Capacity/Title: Owner/ Manager