

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

09 JAN 29 AM 10: 47

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

business is: ORE CONNECTION The transport (a) and trust in a condition (c)	
2. The true name(s) and business address(est business under the assumed business name Name Ametic Mass FOSSAure Lubson	
3. The general type of business transacted up Retail Trade Transportation	nder the assumed business name is: n and Public Utilities
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: ONE Connection	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
8460 Golse Bose 10 83704	(208) 334-2301
5. Name and address for this acknowledgm copy is (if other than # 4 above):	ent
	Secretary of State use only
nature: Anth Mos	IDAHO SECRETARY OF STATE

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