

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.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

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and managed of to to be fore filling.	
The assumed business name which the undersigned business is: Bear Creek Merchanfile	d use(s) in the transaction of
The true name(s) and business address(es) of the e business under the assumed business name: Name	Complete Address
(W43479) Poi	Brandon Rd. Box 278 Aston ID 83839
3. The general type of business transacted under the a Parameter Transportation and Put 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: Bear Creek Merchantile Po Box 278 Kingston 1D 83839	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than #4 above): 	Phone number (optional): (208) (82-49 2 3
	Secretary of State use only
Signature: Manager Spot was a supplied by the supplied of the	
Printed Name: Tim Speckman gg	IDANO SECRETARY OF STATE
Printed Name: Tim Speckman	06/08/2009 05:00 CK: 5844 CT: 237782 BH: 1173746
Capacity/Title: Manager	1 9 25.99 * 25.99 ASSUM NAME # 2