

CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

FILED EFFECTIVE

2017 APR 28 PM 3: 46

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the und	dersigned use(s) in the transaction of business is:
Unlimited L	TE Advanced
the assumed business name (do not include the summer of th	iness address(es) of those doing business under the name you listed in #1): Fiel Recycling Technologies Holling to B36/18 13391
(Name) (Address)	
(Name) (Address)	
3. The general type of business transacted und Retail Trade Construct Agricultut Services Manufac	ction
4. Mailing address for future correspondence: State Garrigan (Name) PO Box 1721 (Address) State 10 97616	5. Name and address for this acknowledgment copy is (if other than # 4): (Name) (Address)
(City) (State) (Zipcode	(City) (State) (Zipcode)
Printed Name: Set Garriga,	Secretary of State use only
Signature: Signature:	IDAHO SECRETARY OF STATE 04/28/2017 05:00 CK:1236 CT:338809 BH:1581611
Printed Name:	
Signature	N194056

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