



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2013 AUG 12 PM 3:03

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

BEST CELLULAR

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

BEST WIRELES LLC

(W128122)

Complete Address

722 N Orchard st boise ID 83706

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

722 N Orchard st boise ID 83706

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature:

Printed Name: Richard Rodriguez Jr

Capacity/Title: OWNER

Signature:

Printed Name:

Capacity/Title:

Secretary of State use only

IDAHO SECRETARY OF STATE
08/12/2013 05:00
CK: CASH CT: 286292 BH: 1305731
1 @ 25.00 = 25.00 ASSUM NAME # 3

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