

## **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. Instructions are included on back of application. FILED EFFECTIVE

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SECRETURY OF STATE STATE OF IDITIO

| The assumed business name which the und business is:  |   |
|---|---|
| 2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  Cem State Flection Co  (C65544)   |   |
| 3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate | der the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to: |
| 4. The name and address to which future correspondence should be addressed:  10 E 45th 5t  Roise, ID 83714  | Secretary of State<br>450 North 4th Street<br>PO Box 83720<br>Boise ID 83720-0080<br>208 334-2301                       |
| 5. Name and address for this acknowledgmen copy is (if other than # 4 above):   | t   |
|   | Secretary of State use only   |
| Signature   |   |
| Printed Name: TERRY FINNEGAN  |   |
| Capacity/Title: PRESIDENT   | IDAHO SECRETARY OF STATE  |
| Signature:  | 02/23/2012 05:00<br>CK: 1972 CT: 62935 BH: 1311964  |
| Printed Name:   | 1 0 25.90 = 25.00 ASSUM HAME # 2  |
| Capacity/Title:   | 7   |
| ebnipmd Rev. 07/20  | 1) 153521   |