CERTIFICATE OF

EILED EFFECTIVE

ASSUMED BUSINESS NAME

2010 JUL -9 PM 4: 15 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Susiness Name. SEURE LARY UP STATE

Please type or print legibly. Instructions are included on back of application.	STATE OF IDAHO
The assumed business name which the undersigned business is: SAGGE TOOL CO	
2. The true name(s) and <u>business</u> address(es) of the er business under the assumed business name: Name (C146997)	ntity or Individual(s) doing Complete Address 195 N CONTROL OF ONE CONTROL
3. The general type of business transacted under the acceptance of the second s	
4. The name and address to which future correspondence should be addressed: 1915 N COURT CROSS MG0101M1 TC-185446	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: M/SB/ Printed Name: Marky S BORDON Capacity/Title: Owned Parsident	Secretary of State use only
Signature:	

IDAHO SECRETARY OF STATE 07/12/2010 05:00 CK: 474219 CT: 172899 BH: 1238892 1 0 25.00 = 25.00 ASSUM NAME #

D140590

Capacity/Title: