

Capacity/Title:_

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2015 JAN -2 PM 2:31

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE

1. The assumed business name which the u business is:	indersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(e business under the assumed business na Name	es) of the entity or individual(s) doing time: Complete Address 1282 N. Ya Kima Way Meridian, FD 83642
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of
4. The name and address to which future correspondence should be addressed: KR\$S 1282 N. Yakıma Way Mevidian I	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	nt
	Secretary of State use only
Signature:	IDAKO SECRETARY OF STATE
Printed Name: Ktuin Nyt	01/02/2015 05:00
Capacity/Title: <u>O WNEV</u> Signature:	CK:CASH CT:216395 BH:1455383 10 25.00 = 25.00 ASSUM NAME #2
Printed Name:	D175806
Capacity/Title:	V113 656

abn.pmd Rev. 07/2010