

FILED EFFECTIVE

09 AUG 21 PM 4:04

SECRETARY OF STATE
STATE OF IDAHO



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.

NOTE: See instructions on reverse before filing.

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

Disaster Master

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

Name

Complete Address

Disaster Mitigation Company, LLC

832 W. Horizon Way, Nampa, ID 83638

(W 779662)

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

- | | |
|--|--|
| ☐ Retail Trade | ☐ Transportation and Public Utilities |
| ☐ Wholesale Trade | ☐ Construction |
| ☒ Services | ☐ Agriculture |
| ☐ Manufacturing | ☐ Mining |
| ☐ Finance, Insurance, and Real Estate | |

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

Idaho Secretary of State
450 N 4th Street
PO Box 83728
Boise ID 83720-0000

(208) 334-2301

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

Disaster Mitigation Company, LLC

832 W. Horizon Way

Nampa, ID 83638

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

Kimball D. Gourlay

PO Box 1087

Boise, ID 83701

Signature:

Printed Name:

Nathaniel R. L. Morda

Capacity/Title:

Manager

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
08/21/2009 05:00
CK: 60380 CT: 67242 BH: 1183998
1 @ 25.00 = 25.00 ASSUM NAME # 2

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