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 APR 16 AM 11: 40

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

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersign business is: Capital Concule Capital Capital Concule Capital Concule Capital Capital Concule Capital Capital Concule Capital Capital Concule Capital Capit	ed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Term WISIN 2483	entity or individual(s) doing Complete Address 33 Hwy 30 Callwell (D) 83607
3. The general type of business transacted under the Retail Trade Transportation and Poly Wholesale Trade Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Tem Wilson 24f 33 Hwy 30 Ca Hwl/10	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):	
	Secretary of State use only
gnature:	IDAHO SECRETARY OF STATE 04/16/2015 05:00 CK:2756080 CT:172099 BH:14713 16 25:00 = 25:00 ASSUM NAME
ignature:	Di70205

1)178375