

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.

FILED EFFECTIVE 08 AUG 12 AN 8:48

SECRETARY OF STATE STATE OF IDAHO

2. The true name(s) and business address(es business under the assumed business name	s) of the entity or individual/a) data
Name	ne:
PETE DIAS	Complete Address
	CALDWELL, IDAHO
3. The general type of business transacted un	83607
	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	Secretary of State use only
gnature: Lete Dias	IDAHO SECRETARY OF STATE OF ST
(signature required)	ESCRETARY OF STOTI
	IDAHO SECRETARY OF STOTI
apacity/Title: PRESIDENT	08/12/2008 05
(see instruction # 8 on back of form)	1 0 25.00 = 25.00 ASSUM