To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of Thusiness is: ENTRAL IDAHO CONSIGNMENTS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Ames Minimal Complete Address Services Agriculture Agriculture Finance, Insurance, and Real Estate Mining 4. The name and address to which future correspondence should be addressed: PO BOX 214 SERVICE IDAHO Submit Certificate of Assumed Business Name and 320.00 fee to: Secretary of State 70 West Jefferson Basement West PO BOX 334-2301 Signature: Printed Name: JADIES M MINIMALE ADDRESS (see instruction # 8 on back of form)		CERTIFICATE OF ASSU! (Please type or print legibly. S	MED BUSINESS NAME 3
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name TAMES WILLE TO ALIO 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Wholesale Trade Agriculture Transportation and Public Utilities Finance, Insurance, and Real Estate Wholesale Trade Agriculture Finance, Insurance, and Real Estate Mining 4. The name and address to which future correspondence should be addressed: POBOK 214 GRANGENILLE, TOAHO Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West POBOX 83720 Bose ID 83720-0080 208 334-2301 Secretary of State TOWNOS SERETARY OF STATE Signature: DAND SERETARY OF STATE SIGNATURE SERETARY OF STATE Signature: DAND SERETARY OF STATE SIGNATURE SERETARY OF STATE SIGNATUR		Pursuant to Section 53-504, Ida	tho Code, the undersigned
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name	1.	business is:	
Dusiness under the assumed business name is/are: Name		CELTRAL IDAHO CONSI	GUMENIS 5 O
3. The general type of business transacted under the assumed business name is: Retail Trade	2.	The true name(s) and business address(es business under the assumed business name	s) of the entity or individual(s) doing me is/are:
3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade		JAMES W MODONALD JR	Complete Address 215 Sc. PAZK ST
Retail Trade			GRANGEVILLE IDAHO
Retail Trade			<u>83530</u>
Wholesale Trade	3.	The general type of business transacted un (mark only those that apply)	nder the assumed business name is:
Submit Certificate of Assumed Business Name and \$20.00 fee to: 83530 5. Name and address for this acknowledgment copy is (if other than # 4 above): Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 1 8 28.88 = 28.88 ASSUM NAME # 2		☐ Wholesale Trade ☒ Agriculture	Finance, Insurance, and Real Estate
Submit Certificate of Assumed Business Name and \$20.00 fee to: 83530 Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE WEST 131268 BH: 319842 1 8 28.88 = 28.88 ASSUM NAME # 2	4.		Phone number (optional):
Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE CK: 2915 CT: 131268 BH: 319842 1 8 28.88 = 28.88 ASSUM NOME # 2			
5. Name and address for this acknowledgment copy is (if other than # 4 above): Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDANO SECRETARY OF STATE CK: 2915 CT: 131268 BH: 319842 1 8 28.88 = 28.88 ASSUM NAME # 2			, and the second
Signature:	5.	Name and address for this acknowledgme	nt PO West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
1 # 20.80 = 20.00 ASSUM NAME # 2			
1 # 20.80 = 20.00 ASSUM NAME # 2	Oine at	- B White 1	DAHU SECRETARY OF STATE
Capacity: OUNER/SOLE PROP. (See instruction # 8 on back of form)	•		1 # 20.00 = 20.00 ASSUM NAME # 2