CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2014 SEP 25 'AM 8: 48

SECRETARY OF STATE STATE OF IDAHO

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

LRC TOWING	
The true name(s) and <u>business</u> addres business under the assumed business	
<u>Name</u>	Complete Address
KEITH P. MINK	1730 W QUINN RD #540
	POCATELLO, ID 83204
The general type of business transacte	ed under the assumed business name is:
	ation and Public Utilities
Services Agricultu Manufacturing Mining Finance, Insurance, and Real Es	Submit Certificate of Assumed Business
. The name and address to which future correspondence should be addressed: KEITH P. MINK	Coolettary or State
1730 W QUINN RD #540	Boise ID 83720-0080
POCATELLO, ID 83204	208 334-2301
Name and address for this acknowledge copy is (if other than # 4 above):	gment
ABOM B	Secretary of State use only
nature:	IDAHO SECRETARY OF STATE
ted Name: KEITH P. MINK	09/26/2014 05:00
pacity/Title: OWNER	CK:17081442685 CT:118346 BH 16 25.00 = 25.00 ASSUM N2
nature:	(
ited Name:	_ DU3361

abn.pmd Rev. 07/2010

Capacity/Title:_