

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.

2013 FEB 25 AM 9: 48

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

The assumed business name which the business is: Blue Moon Traders	ne undersigned use(s) in the transaction of
The true name(s) and <u>business</u> address business under the assumed business <u>Name</u> Cynthia S. Minshall	ss(es) of the entity or individual(s) doing s name: <u>Complete Address</u> 104 N Front Street, Troy, ID 83871
Wholesale Trade Construc	tation and Public Utilities ction
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: Cynthia S. Minshall 104 N Front Street, Troy, ID 83871	Toecreialy of State T
5. Name and address for this acknowledge copy is (if other than # 4 above).	208 334-2301 gment
Signature: Linthia & Minchall	Secretary of State use only
Printed Name: Cynthia S. Minshall	
Capacity/Title: Owner	
Signature:	
Printed Name: Capacity/Title:	IDAHO SECRETARY OF STATE 02/25/2013 05:00 CK: 1501 CT: 279786 RH: 1361542 1 0 25.00 = 25.00 ASSUM NAME # 2