

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 OCT 27 PM 4: 06

SECHETARY OF STATE STATE OF IDAHO

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

The true name(s) and <u>business</u> addre business under the assumed business	- · · · · ·
<u>Name</u> Michael Batt	<u>Complete Address</u> 9134 N 5th E, Idaho Falls, Idaho 83401
_ • • • • • • • • • • • • • • • • • • •	ed under the assumed business name is: tation and Public Utilities ction
Services Agricultu Manufacturing Mining Finance, Insurance, and Real E	Submit Certificate of Assumed Business
. The name and address to which future correspondence should be addressed Same	1 Decidacy of State
Name and address for this acknowled	lgment
COPY is (if other than #4 above);	

10AHO SECRETARY OF STATE 10/27/2014 05:00

CK:CASH CT:302601 BH:1446918 16 25.00 = 25.00 ASSUM NAME #2

abruping Rev 07/2010

Capacity/Title: Manager

Signature: ___

Printed Name: __

Capacity/Title: