

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 11 NOV -2 AM 9-01

Please type or print legibly. Instructions are included on back of applica	SEUHETARY OF STATE STATE OF IDAHO
The assumed business name which the undersigned use(s) in the transaction of business is:	
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Name Complete Address	
CMA HOUPT 10	154 N. VELLON STAME FOR 1500-1501-100-100 1500-1501-1501-1501-1
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future	
correspondence should be addressed: OMAZ FALL HOUPT 1585 HOLLI PARK DRIVE 15AHD FALLS, 10AHD 8240 5. Name and address for this acknowledgment copy is (if other than # 4 above):	450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
Printed Name: CIA2 HOUPT Capacity/Title: OUNZE Signature: GAIL Houst	IDAHO SECRETARY OF STATE
Printed Name:	11/02/2011 05:00 CK: NO CHECK # CT: 263839 BH: 1296633 1 0 25.00 = 25.00 ASSUM NAME # 2

abn.pmd Rev. 07/2010

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