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## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2012 MAR 23 AM 10: 27

SECRETARY OF STATE STATE OF IDAHO

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

OA	AK PLAZA
2. The true name(s) and <u>business</u> address(business under the assumed business not have sun valuey LAND COMPANY LP WILLIAM A PARSONS	name:
Wholesale Trade Construction	tion and Public Utilities on
<ul><li>☐ Services</li><li>☐ Manufacturing</li><li>☐ Mining</li><li>☑ Finance, Insurance, and Real Estate</li></ul>	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed:     WILLIAM A PARSONS	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
BOX 910 BURLEY, IDAHO 83318	208 334-2301
5. Name and address for this acknowledged copy is (if other than # 4 above):	ment -
ignature: <u>Mulla Paravo</u>	Secretary of State use only
rinted Name: WILLIAM A PARSONS	
apacity/Title:_ONE OWNER gnature:	IDAHO SECRETARY OF STATE  43/23/2912 95:4
rinted Name:	CK: 1566 CT: 158818 BH: 1316 1 8 25.00 = 25.00 ASSUM MAM
Capacity/Title:	

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