

Capacity/Title:

## CERTIFICATE OF ASSUMED BUSINESS NAME

11 MAY -5 AM 8:21

FILED EFFECTIVE

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

SECRE AY OF STATE

STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

 The assumed business name which the undersigned use(s) in the transaction of business is: 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address prises, LLC 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction → Services Agriculture Submit Certificate of Mining Manufacturing Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street Andrew Isaacson PO Box 83720 Boise ID 83720-0080 Linneatur Dr 208 334-2301 Alene, TD 83815 5. Name and address for this acknowledgment CODY IS (if other than #4 above). Secretary of State use only Signature: / Printed Name: Andrew Capacity/Title: Owner Signature: IDAHO SECRETARY OF STATE 05/05/2011 05:00 CK: 1581 CT: 258511 BH: 1272387 Printed Name:

abn.pmd Rev. 07/2010

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