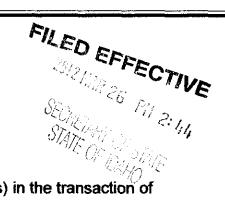


CERTIFICATE OF ASSUMED BUSINESS NAME

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

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



D154320

DLC's Com The true name(s) and <u>business</u> address(est business under the assumed business name).	
Name	Complete Address
Darren Barr	25 N. Main Street, Downey, ID 83234
Cindy Barr	25 N. Main Street, Downey, ID 83234
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Description Services 25 N. Main St 200 23234	Submit Certificate of Assumed Business
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	Secretary of State use only
gnature: Van Sa	
inted Name: Davien Bar	
gnature: Cindy Barr	IDANO SECRETARY OF STATE @3/27/2012 @5:00 CK: 3223 CT: 268559 BN: 1316925 1 @ 25.00 = 25.00 ASSUM NAME N
apacity/Title: Owner	7