

Capacity/Title:

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2014 MAY 19 PM 3: 08

Please type or print legibly.

Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

mati detions are included on back of applic	STATE OF IDAHO
The assumed business name which the under business is:  BEACH WORN	ersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  ORI LINESCY  ORIGINATION CONTROL C	
3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	er the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
-1/2 (1) -1	Secretary of State use only
Signature: No Stadio	IDAHO SECRETARY OF STATE
Printed Name: LOKI UNDSCH Capacity/Title: Capa	05/20/2014 05:00 CK:CASH CT:297055 BH:1425464
Capacity/Title: Signature:	16 25.00 = 25.00 ASSUM NAME #2
Printed Name:	D 171345

abn.pmd Rev. 07/2010