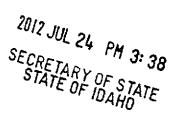


CERTIFICATE OF ASSUMED BUSINESS NAME

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.



mon designed and meridded on book of applicat	ON TUAHORIE
 The assumed business name which the undersited business is: 	igned use(s) in the transaction of
1 6 1	
A+ Kroperty Management	
2. The true name(s) and <u>business</u> address(es) of the true name(s) and	the entity or individual(s) doing
business under the assumed business name: Name	Complete Address
$\frac{0000}{c}$	1247 S. Cherrive Ave.
	Baise ID 83709
3. The general type of business transacted under	the assumed husiness name is:
Retail Trade Transportation and	
Wholesale Trade Construction	
Services Agriculture	
Manufacturing Mining	Submit Certificate of 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
PROPS U.C.	PO Box 83720
6247 S. Cheshive Ave.	Boise ID 83720-0080 208 334-2301
Boise, ID. 83709	200 334-2301
5. Name and address for this acknowledgment	
CODY IS (if other than # 4 above):	
	Secretary of State use only
gnature:	
nted Name: Justan Englison	
apacity/Title: Owwer	1DAHO SECRETARY OF STATE 27/24/2012 05:00 CK: 187364 CT-128 05:00
gnature:	CK: 1073616 CT: 172099 BH: 1333259 1 0 25.00 = 25.00 ASSUM NAME # 3
inted Name:	
apacity/Title:	N 157

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