

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2012 AUG -9 PM 4: 18

SECRETARY OF STATE STATE OF IDAHO

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

| Lar | mbsWul Insulators |
|--------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| 2. The true name(s) and <u>business</u> addre business under the assumed business Name LESCO Enterprises, LLC. W 4/875 | ess(es) of the entity or individual(s) doing s name: <u>Complete Address</u> 300 Krahn Ln. McCall, ID 83638 |
| ☐ Retail Trade ☐ Transpor ☐ Wholesale Trade ☑ Construc | |
| Services Agricultu Manufacturing Mining Finance, Insurance, and Real Es | Submit Certificate of Assumed Business |
| The name and address to which future correspondence should be addressed P.O. Box 2663 McCall, ID 83638 | 000.012., 0. 202.0 |
| 5. Name and address for this acknowled copy is (if other than # 4 above): | gment |
| | Secretary of State use only |
| gnature Serlic Holis | |
| inted Name: Leslie L. Roberts | |
| pacity/Title: Manager | |
| gnature: | |
| inted Name: apacity/Title: | 08.09/2012 05:00 CK: CASH CT: 273149 BH: 13353 1 # 25.80 = 25.86 ASSUM MANE |

abn.pmd Rev. 07/2010

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