

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 2016 NOV -8 submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

SECRETARY OF ON

	instructions are included on back of ap-	olication.	STATE OF IDAHO
1.	The assumed business name which the undersigned use(s) in the transaction of business is:		
	CCS Preser	ntation Syste	ems
2.	The true name(s) and <u>business</u> address(est business under the assumed business name Name Computer Projection Systems, LLC (U97475)	me:	entity or individual(s) doing Complete Address ones Blvd., Ste. 3, Las Vegas, NV 89146
3.	✓ Retail Trade ☐ Transportation ☐ Wholesale Trade ✓ Construction ✓ Services ☐ Agriculture	n and Pub	
	ManufacturingMiningFinance, Insurance, and Real Estate	<u> </u>	Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: CCS Presentation Systems 2870 S. Jones Blvd., Ste, 3		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgme copy is (if other than # 4 above): same	nt	
Signa	iture: Kul Hawers		Secretary of State use only
rinte	ed Name: Tenli Flourens	2	
Capa	city/Title:_Manager		IDAHO SECRETARY OF STATE
rinted Name:			CK: 12975 CT: 158018 BH: 1246239 1 8 25.00 = 25.00 ASSUM MANE #
	city/Title:		

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