

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

Signature:_____

2017 JAN 30 AM 9: 32

	SECRETARY OF STATE					
1.	The assumed business name which the undersigned use(s) in the transaction of the siness is:					
	Red Sky Travel Insurance					
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):					
	Out Of Towne, LLC	LLC 301 Bendix Rd, Suite 300, Virginia Beach				
	(Name)	(Address)			<u> </u>	
	WITTU	· · · · · · · · · · · · · · · · · · ·				
	(Name)	(Address)				
	(Name) (Address)					
	(Name)	(Address)				
	Th					
3.	The general type of busines	ss transacted under t	ne assumed busines	s name is:		
	☐ Retail Trade ☐ Construction			rtation and Public L	Itilities	
	☐ Wholesale Trade ☐ Agriculture		∐ Mining			
	⊠ Services	Manufacturin	g 🔀 Finance	, Insurance, and Re	al Estate	
4.	Mailing address for future co	orrespondence:	5. Name and add	lress for this acknow	/ledgment	
	Red Sky Travel Insurance		N/A	,		
	(Name)		(Name)			
	PO Box 750		/Add-200)			
	(Address) Kitty Hawk, NC	27949	(Address)			
		tate) (Zipcode)	(City)	(State)	(Zipcode)	
Pr	inted Name: W. Laird Sager,	Jr	Sec	cretary of State use only		
o:.		· / A .				
Signature: W. Land Dage /.			1DAHO SECRETARY OF STATE 01/30/2017 05:00			
Printed Name:			,	CK:1393 CT:333926 BH:1566271		
Signature:			1@ 25.0	0 = 25.00 ASSUM	NAME #2	
Printed Name:			1	D191779		

Rev. 08/2015