

Capacity/Title:

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

06 MAR 22 PH 2: 58

FILED EFFICANCE

submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the under business is:  RED ROCKET	rsigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) or business under the assumed business name:  Name  And Ful Thornton  Colleen Arayle	· · · · · · · · · · · · · · · · · · ·
3. The general type of business transacted under Retail Trade Transportation at Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future	er the assumed business name is:  nd Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State
correspondence should be addressed:  RED ROCKET  401 S, 9TH ST SUITE 102  ROISE 1D 83702  5. Name and address for this acknowledgment	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Copy is (if other than # 4 above):  Lindra Thornton	Secretary of State use only
Signature: And Report From Printed Name: Collegn Availe.	IDAHO SECRETARY OF STATE    GRADULE   GRADULE