

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Printed Name:

Signature:

FILED EFFECTIVE

2018 JUN 15 PM 2: 24

•	Filing fee:	\$25.00.	SECRETARY OF STATE STATE OF IDAHO	
1.	The assumed busines	ss name which the undersign	ed use(s) in the transaction of business is:	
	Freeshifter Themes			
	TTCCSKIN ICI	THE THE STATE OF T		
2	The individual and/or	antity manner and business a	ddwaa(aa) af thaaa daina businaas uuda	
۷.		entity names and business a ss name (do <u>not</u> include the name	ddress(es) of those doing business under you listed in #1):	
١١٧وت) Freeshifter 1	LC 9687 W.	Caraway Dr., Boise, ID 83704	
	(Name)	(Address)	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
	(Name)	(Address)		
	(Name)	(Address)		
	(Name)	(Address)		
4.	☐ Wholesale Trade☐ ServicesMailing address for full	Manufacturing	 Mining Finance, Insurance, and Real Estate Name and address for this acknowledgment 	
	# C 1.61 A		COPY IS (if other than # 4):	
	(Name)		(Name)	
	(Name) 9687. W. Caraway Dr. (Address)		(Address)	
	Buise ID 83704		(Aduress)	
	(City)	(State) (Zipcode)	(City) (State) (Zipcode)	
Pri	nted Name:Cal	vin Koephe	Secretary of State use only	
Sig	gnature:	1.11	IDAHO SECRETARY OF STATE	
Pri	inted Name:	·	06/15/2018 05:00	
Sic	gnature:		CK:19262626 CT:172099 BH:164920- 16 25.00 = 25.00 ASSUM NAME #3	
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Rev. 08/2015

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