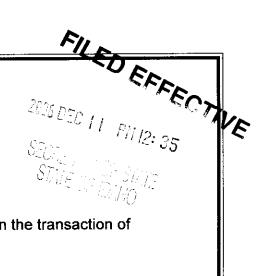


CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.



Legacy Knives	
The true name(s) and business address(es) of business under the assumed business name:	the entity or individual(s) doing Complete Address 122 S 800 W, Blackfoot, ID 83221
3. The general type of business transacted under	the assumed business name is:
 ✓ Retail Trade ☐ Transportation an	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): (208) 684-9542
	Secretary of State use only
gnature: (signature required) (inted Name: Verl Allen Jensen apacity/Title: Owner (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE 12/12/2006 05:6 CK: 49821 CT: 158018 BH: 181 1 P 25.80 = 25.80 ASSUM NAME