



**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.

10 MAY 13 PM 3:35

**SECRETARY OF STATE
STATE OF IDAHO**

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Optigenics Boise

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
Optigenics LLC	1317 W. River St., Boise, ID 83702
(W93326)	

3. The general type of business transacted under the assumed business name is:

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

Optigenics LLC
1317 W. River St.
Boise, ID 83702

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Kimbell D. Gourley
PO Box 1097
Boise, ID 83701

Secretary of State use only

Signature:

Zane Sterling
(signature required)

Printed Name:

Zane Sterling

Capacity/Title:

Manager

(see instruction # 8 on back of form)

Form 53-504
Revised 04/2003
g:\corpform\53-504\53-504b.pdf

IDAHO SECRETARY OF STATE
05/13/2010 05:00
CK: 61936 CT: 67242 BH: 1222178
1 @ 25.00 = 25.00 ASSUM NAME # 2

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