

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

SECRETARY OF STATE

Please type or print legibly. Instructions are included on back of application.

The assumed business name which the business is: Syky C	, 1
2. The true name(s) and <u>business</u> address business under the assumed business Name (ameron Serf	
_ · · · · _	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Lyle Whalen Por Box 150 Mage TD 83658	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledg copy is (if other than # 4 above):	ment
Signature: MMW AM Self Printed Name: Cameron Self Capacity/Title: Co-Owner	Secretary of State use only IDAHO SECRETARY OF STATE 02/23/2015 05:00 CK:267 CT:306808 BH:1463129 16 25.00 = 25.00 ASSUM NAME #2

D176928

Signature:

Printed Name: Kyle ahalen

Capacity/Title: Dwne #