

Signature: 1.

Printed Name:

Capacity/Title:

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.

(signature required)
HAYDEN HOOPES-MAZZARELLI

PRESIDENT

(see instruction # 8 on back of form)

FILED EFFECTIVE

10 MAY 14 AM 8: 25

SECRETARY OF STATE STATE OF IDAHO

SCUMPL	JNCH
The true name(s) and business address(es) of business under the assumed business name: Name BLACK AND RED INC.	of the entity or individual(s) doing Complete Address 813 LA CASSIA DR. BOISE, ID 83705
C 183402	
The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture	er the assumed business name is: and Public Utilities Submit Certificate of
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: BLACK AND RED INC.	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
813 LA CASSIA DR	(208) 334-2301
BOISE, ID 83705	
Name and address for this acknowledgment copy is (if other than # 4 above):	

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IDAHO SECRETARY OF STATE 95/14/2010 95:00 CK: 1153 CT: 238993 BH: 1222405 1 8 25.80 = 25.80 ASSUM NAME W

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