

## 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. Instructions are included on back of application.

## FILED EFFECTIVE

2013 MAR -4 PM 2: 30

SECRETARY OF STATE STATE OF IDAHO

business is: ALPHA TACTICAL ARMORY	
2. The true name(s) and <u>business</u> addr business under the assumed busine  Name  Ages Enterprises Inc.  (C156002)	ress(es) of the entity or individual(s) doing ess name:  Complete Address  10 Burnett Dr, Boise ID 83716
	Submit Certificate of Assumed Business
4. The name and address to which futu correspondence should be addresse Berend Ages  Same 25 #2	Secretary of State
5. Name and address for this acknowle copy is (if other than # 4 above):	
Signature:  Printed Name: Berend J. Ages  Capacity/Title: Pcesiden	Secretary of State use only
Signature:Printed Name:	IDAHO SECRETARY OF STATE  93/04/2013 05:00  CK: 1308478 CT: 172079 BH: 1362817  1 8 25 88 = 25 88 0551M NOME # 2

abn pmd Rev. 07/2010

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Capacity/Title:\_