

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTIVE

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

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

The assumed business name which the undersign business is: - OUERS Play Pleasure	O
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name SHACEY LUKAC 48	entity or individual(s) doing Complete Address CS Selle Rd MA Point ID 83864
3. The general type of business transacted under the assumed business name is: X Retail Trade	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Acey Lukac 1865 Sulke Rd 500 Foint TO 83864	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above): 	Phone number (optional): (208)263- >159
	Secretary of State use only
Signature: Stacey Lukac Printed Name: Stacey Lukac Capacity: Owner #8 on back of form)	IDAHO SECRETARY OF STATE ・

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