

Signature: _____

Capacity/Title:__

Printed Name:

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2015 MAR -6 AM 8: 58

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

Premier Property Solutions	
The true name(s) and <u>business</u> address(e business under the assumed business na <u>Name</u> Black Dog Outfitters, Inc.	
<u> </u>	
3. The general type of business transacted Retail Trade Transportation Wholesale Trade Construction Services Agriculture	on and Public Utilities
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estat	Submit Certificate of Assumed Business te Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Premier Property Solutions	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
P.O. Box 2364 Idaho Falls, ID 83403	208 334-2301
5. Name and address for this acknowledgm copy is (if other than # 4 above):	nent
	Secretary of State use only
gnature:	IDAHO SECRETARY OF STA
inted Name: Darren Puetz apacity/Title: President	_ 03/06/2015 05:0 CK:2627 CT:307347 BH:1 - 10 25.00 = 25.00 ASSUM

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