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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, t submits for filing a certificate of Assumed Please type or print legibly. Instructions are included on back of ap	S NAME he undersigned Business Name.
<ol> <li>The assumed business name which the ur business is: <u>Way Out West Productions</u></li> </ol>	ndersigned use(s) in the transaction of
<ol> <li>The true name(s) and <u>business</u> address(es business under the assumed business name <u>Name</u></li> <li>Robyn A Bircher</li> </ol>	s) of the entity or individual(s) doing ne: <u>Complete Address</u> 209 2nd Street Idaho Falls ID 83401
<ul> <li>3. The general type of business transacted up</li> <li>Retail Trade Transportation</li> <li>Wholesale Trade Construction</li> <li>Services Agriculture</li> <li>Manufacturing Mining</li> <li>Finance, Insurance, and Real Estate</li> </ul>	n and Public Utilities Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Robyn Bircher 209 2nd Street Idaho Falls ID 83401	Name and <b>\$25.00</b> fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgmer copy is (if other than # 4 above):</li> </ol>	nt
Signature: Roby a Dicher Printed Name: Roby a Bricher Capacity/Title: Juner, President	Secretary of State use only
Signature: Printed Name: Capacity/Title:	IDAHO SECRETARY OF STATE <b>07/09/2013 05:00</b> CK: 1108 CT: 285117 BH: 1381318 1 © 25.00 = 25.00 ASSUM NAME # 2
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