FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME 2013 OCT 10 AM 9: 36

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. SECRETARY OF STATE STATE OF IDAHO

DK SUNGLASSES	
The true name(s) and <u>business</u> add business under the assumed busine <u>Name</u> ISAT INCORPORATED	fress(es) of the entity or individual(s) doing ess name: <u>Complete Address</u> 4 9 8 HIDDEN TRAIL LN, TWIN FALLS ID 83301
(C129219)	TO THE ENT, TWINT ALLS ID 65501
Retail Trade Transp	Submit Certificate of Assumed Business
4. The name and address to which fut correspondence should be address LICHEN LEE TSAI 488 HIDDEN TRAIL LN TWIN FALLS, ID 83301	ure Secretary of State
5. Name and address for this acknowle copy is (if other than #4 above):	edgment
ignature: L:CLLL	Secretary of State use only
rinted Name: LICHEN LEE TSAI	
apacity/Title: PRESIDENT	
rinted Name:	19/19/2913 95-99

D166333