9/21/2012

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.

2013 MAY 29 AM 8: 38

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

1. The assumed business name which the undersigned use(s) in the transaction of business is: Alligator Performance Shop 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address vesel Performance UC 5097 N. Bulling Center Dr. 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services _____ Agriculture Submit Certificate of Manufacturing Mining Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street Alligator Performance Shop PO Box 83720 Boise ID 83720-0080 5097 M. Bulding Center Dr 208 334-2301 5. Name and address for this acknowledgment CODY IS (if other than # 4 above). Secretary of State use only Signature: ____ Printed Name: Capacity/Title: owner/ CFO IDAHO SECRETARY OF STATE 05/29/2013 05:00 CK: 2574 CT: 283668 BH: 1375764 Signature: ___ Printed Name: Capacity/Title:) 163491