



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**Please type or print legibly.**

**NOTE: See instructions on reverse before filing.**

**FILED EFFECTIVE**

09 SEP 10 AM 8:09

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

## OutKast Marine

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name \_\_\_\_\_

## Michael Grant

## Douglas Tibbitts

### Complete Address

**1647 Sunnyside Bench Rd. Lenore, ID 83541**

**4843 Springview Lane, Lewiston, ID 83501**

- 3. The general type of business transacted under the assumed business name is:**

- ☐ Retail Trade      ☐ Transportation and Public Utilities  
☐ Wholesale Trade      ☐ Construction  
☐ Services      ☐ Agriculture  
☒ Manufacturing      ☐ Mining  
☐ Finance, Insurance, and Real Estate
- Submit  
 Assume  
 Name:

- 4. The name and address to which future correspondence should be addressed:**

## Michael Grant

**1847 Sunnyside Bench Rd**

**Lenore, ID 83541**

**Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:**

**Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080**

**(208) 334-2301**

5. Name and address for this acknowledgment copy is (if other than # 4 above):

**Signature:**

Michael J. Smith

**Colonist recruitment**

**Printed Name:**

## Michael Grant

**Capacity/Title:**

## Partner

(see instruction # 8 on back of form)

**Secretary of State use only**

Revised 04/2009

IDAHO SECRETARY OF STATE  
09/10/2009 05:00  
CK: 1757 CT: 150010 BH: 1106462  
1 @ 25.00 = 25.00 ASSUM NAME 1 2

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