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CERTIFICATE OF ASSUMED BUSINESS N	Click here to clear form.
Pursuant to Section 53-504, Idaho Code, the und submits for filing a certificate of Assumed Busine	dersigned AM 8: 39
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	
C SQUARED ENTERTAINMENT.	
 The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address 	
CAMERON W. COX 2	Complete Address 532 SPARROW LOOP ST FALLS I.D. 83854
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 Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 450 North 4th Street PO Box 83720
2532 SPARROW LOOP POST, FALLS, ID; 83854	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature:	Secretary of State use only
Printed Name: CAMERON W. COX	IDAHO SECRETARY OF STATE 04/29/2014 05:00 CK:106 CT:296275 BH:1422545
Capacity/Title: <u>OWNER</u> Signature:	10 25.00 = 25.00 ASSUM NAME #2
Printed Name:	D170804
Capacity/Title:	

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