

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

12 JAN 12 AH 9: 04

SECRETARY OF STATE STATE OF IDAHO

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

business is:	
Mad Rive	er Laser
The true name(s) and <u>business</u> address(es) business under the assumed business name Name	, , ,
· · · · · · · · · · · · · · · · · · ·	700 South Oneida St. Rupert, ID 83350
	To Court Oriolate St. Mapor, 10 00000
3. The general type of business transacted und	der the assumed business name is: 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
Nicole Pratt 700 South Oneida St	Boise ID 83720-0080
Rupert ID 83350	208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
ignature: Nucle Hott	
rinted Name: Nicole L Pratt	
apacity/Title: Owner	
ignature:	IDAHO SECRETARY OF STATE 01/12/2012 05:00
rinted Name:	CK: 3122 CT: 265875 BH: 1385826 1 8 25.80 = 25.80 ASSUM NAME #
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