

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.

11 APR 27 AM 8: 40

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

SECREMENT OF STATE

| | | OTTE OF IDAHO |
|---|---|--|
| The assumed business name which the undersigned use(s) in the transaction of business is: | | |
| - | Shootsis Bout Co | JERS - UpHOLSTERY |
| | 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 |
| | Chuck A LONGS | 219 Lauch Rd |
| | | Kameh - 50 83536 |
| _ | | |
| 3. T | he general type of business transacted und | der the assumed business name is: |
| | Retail Trade Transportation | and Public Utilities |
| | Wholesale Trade Construction | |
| | Services Agriculture | |
| | | Submit Certificate of |
| 1 | Manufacturing | Assumed Business |
| ĺ | Finance, Insurance, and Real Estate | Name and \$25.00 fee to: |
| 4. T | he name and address to which future | Secretary of State |
| C | orrespondence should be addressed: | 450 North 4th Street |
| | Chuck A. Onstes | PO Box 83720 |
| | 219 land Do | Boise ID 83720-0080 |
| | VAMIN TE 83536 | 208 334-2301 |
| - / | | |
| | lame and address for this acknowledgment Opy is (# other than # 4 above): | |
| U | CPY IS (If Date: It all # 4 above). | |
| _ | | |
| - | | |
| _ | | Secretary of State use only |
| signature: Church Some | | |
| Printed Name: Chuck to Could | | |
| Capacity/Title: Och 20 | | |
| ignature: | | |
| rinted Name: IDAHO SECRETARY OF STATE | | |
| Capacity/Title: | | 04/27/2011 05:00 CK: 128 CV: 158818 PM: 1971847 |

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CK: 1228 CT: 158018 BH: 1271847 1 0 25.00 = 25.00 ASSUM NAME # 2

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