

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.

08 JAN 24 AM 9: 29

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

	Select Sound
2. The true name(s) and business add business under the assumed busin Name Wing It Enterprises, LLC	ress(es) of the entity or individual(s) doing ess name: Complete Address 5036 Whitaker Road, Chubbuck, ID 83202
<u> </u>	
3. The general type of business trans	cted under the assumed business name is:
	Estate Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
	Secretary of State use only
nature: Multi Fig. (elgristure required) ted Name: Michael J. Fisher eacity/Title: LLC Member (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE O1/24/2008 05 = 06 CK: 2956 CT: 221390 BH: 18963: 1 9 25.00 = 25.00 ASSUN NAME