Printed Name: (

Printed Name: ___ Capacity/Title: ___

Signature: _

Capacity/Title: () いかせい

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

2013 JAN 24 AM 9:52

SECRETALY OF STATE STATE OF IDAHO

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 business is: CSKyle Photos 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address 12649 W. Silverbrook St 3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Construction Wholesale Trade Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301 ROISE ID 5. Name and address for this acknowledgment CODY IS (if other than # 4 above). Secretary of State use only Signature:

IDAHO SECRETARY OF STATE
01/24/2013 05:00
CK: 3892 CT: 158010 BH: 1357114
1 0 25.00 = 25.00 ASSUM NAME # 2

D160524