



# 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 DEC 20 AM 9:13

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Bonneville Tactical ~~SS~~

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

Shannon Karl Johnson

13567 N. 45th E. Idaho Falls, ID 83401

Trou Bart McNett

13567 N. 45th E. Idaho Falls, ID 83401

3. The general type of business transacted under the assumed business name is:

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade             | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade          | <input type="checkbox"/> Construction                        |
| <input type="checkbox"/> Services                            | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |  |

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

4. The name and address to which future correspondence should be addressed:

Bonneville Tactical ~~SS~~  
13567 N. 45th E. ~~SS~~  
Idaho Falls, ID 83401

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

208-881-1936

Signature

Shannon Karl Johnson  
(signature required)

Printed Name: Shannon Karl Johnson

Capacity/Title: \_\_\_\_\_

(see instruction # 8 on back of form)

Secretary of State use only

g:\corpforms\abn form\abn.p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
12/20/2013 05:00  
CK: 36525 CT: 298841 BH: 1482572  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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