CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

OF STATE, STATE OF IDAHO

Code the undersigned

	gives notice of adoption of an Assumed Business Name.		
1.	. The assumed business name which the undersigned use(s) in the transaction of business is:		
	The Martial Flame USA Black	BeH School	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
		nplete Address Nerwind Pl.	
	Nampa	I) 83651	
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)		
	☐ Wholesale Trade ☐ Agriculture ☐ Final	nsportation and Public Utilities ance, Insurance, and Real Estate iing	
4.	The name and address to which future Phone number (optional): correspondence should be addressed:		
	The Martal Flame 230 Caldwell Blud.	Submit Gertificate of Assumed Business Name and \$20.00 fee to:	
	Llampa IN 83651	Secretary of State 700 West Jefferson	
5.	Name and address for this acknowledgment copy is (if other than # 4 above).	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
	*	Secretary of State use only	
	Sevision 1/98	IDAHO SECRETARY OF STATE	
	Q II () ()	11/18/1999 09:00 v. 1357 ct. 19:105 Du. 24720?	

Signature: 10.

alkins Printed Name:

Capacity: tresident

(see instruction # 8 on back of form)

28.88 = 28.88 ASSUM NAME # 2

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