

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

2015 FEB 17 AM 9: 35

SECRETARY OF STATE STATE OF IDAHO

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

The true name(s) and <u>business</u> address business under the assumed business	s(es) of the entity or individual(s) doing
<u>Name</u>	Complete Address
Fuzzy Solutions LLC	841 Chamberlain Ave.
(W88970)	Idaho Falls, ID. 83402
	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Fuzzy Solutions LLC 841 Chamberlain Ave. Idaho Falls, ID. 83402	Secretary or State
Name and address for this acknowledge copy is (if other than # 4 above):	gment
atule:	Secretary of State use only

CK:206078711113 CT:306551 BH:1462187 16 25.00 = 25.00 ASSUM NAME #2

D 176824

9/21/2012 abn.pmd Rev.07/2010

Signature: _

Printed Name: __

Capacity/Title:_