

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2011 SEP 28 AM 10: 38

SECRETARY OF STATE STATE OF IDAHO

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

business is: FREELANCE PRINT SOLUTIONS The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:			
		Name	Complete Address
		AARON LABARBERA LLC	11646 STOCKBRIDGE WAY
(W106838)	CALDWELL ID 83605		
The general type of business transacted un	nder the assumed business name is:		
	and Public Utilities		
☐ Wholesale Trade ☐ Construction			
Services Agriculture			
Manufacturing Mining	Submit Certificate of Assumed Business		
Finance, Insurance, and Real Estate			
The name and address to which future	Secretary of State		
correspondence should be addressed:	450 North 4th Street		
AARON LABARBERA LLC	PO Box 83720		
DBA FRELANCE PRINT SOLUTIONS	Boise ID 83720-0080 208 334-2301		
11646 Stockbridge way, caldwell ID 83605			
Name and address for this acknowledgmer	nt		
COPY IS (if other than # 4 above):			
	Secretary of State use only		
ature:			
ed Name: AARON LABARABERA			
acity/Title: MEMBER			
ature:	TRANS SPONTAGE OF STATE		
red Name: KRISTINA LABARBERA acity/Title: MEMBER	IDAHO SECRETARY OF STATE 09/28/2011 05:00 CK: 794629 CT: 172899 BH: 129222		

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