

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

**FILED EFFECTIVE** 

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2013 APR -2 AM 8: 54

Please type or print legibly. Instructions are included on back of application.	SECRETALY OF STATE STATE OF IDAHO
The assumed business name which the undersigned business is:	ed use(s) in the transaction of
Summit Firearms	Academy
2. The true name(s) and <u>business</u> address(es) of the elements business under the assumed business name:  Name  Resert Kroni 201  Mary Kroni 201v.	entity or individual(s) doing  Complete Address
3. The general type of business transacted under the a Retail Trade Transportation and Put Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Summit Firearns Academy  201 N. Kings rd*101  Nampa TD. 83687  5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature: Robert Krone  Printed Name: Robert Krone  Capacity/Title: Chief Instructor	Secretary of State use only
Signature: 1/ by Frong	IDAHO SECRETARY OF STATE  94/62/2613 95:00
Printed Name: Mary Krone  Capacity/Title: Instructor/man	CK: 1693 Cf: 158010 BH: 1367458 1 0 25.00 = 25.00 ASSUM NAME # 2

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