CERTIFICATE OF	
ASSUMED BUSINESS NAM	FILED EFFECT
Pursuant to Section 53-504, Idaho Code, the undersign submits for filing a certificate of Assumed Business Na	164CT
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
Dusiness is:	•••
- HELMETWEAPZ. Com	· · · · · · · · · · · · · · · · · · ·
2. The true name(s) and <u>business</u> address(es) of the er	ntity or individual(s) doing
business under the assumed business name: Name	
	Complete Address
<u>2179 A</u>	J. TRESTLE DR. MERIDIAN
	<u> </u>
3. The general type of business transacted under the as	
 Retail Trade Retail Trade Transportation and Publi Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: <u>ZIT9</u> TRESTLE DE. <u>MERIDIAN, TD</u> 83646 5. Name and address for this acknowledgment copy is (if other than #4 above):	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 Phone number (optional): Zoe - 893 - 5777
	Secretary of State use only
nature:	
isignature required)	IDAHO SECRETARY OF STATE
pacity/Title: OWNER/OPERATOR	03/26/2007 05:00 CK: 1092585 CT: 172099 BH: 1042520 1 0 25.00 = 25.00 ASSUM NAME 0 2