

## 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.

12 JAN 20 AM 8: 57

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

SECRETARY OF STATE

2. 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	Electric Shocker Tattoo	
Retail Trade	business under the assumed busine <u>Name</u> Nestor Juarez	ss name: <u>Complete Address</u> 403 E Main St Burley ID 83318
Correspondence should be addressed:  Nestor Juarez  518 Oakley Ave  Burley ID 83318  5. Name and address for this acknowledgment copy is (if other than # 4 above):  Signature:  Printed Name:  ADTOL JAREZ  Capacity/Title:  Signature:	Retail Trade Transport Wholesale Trade Construct Services Agricul Manufacturing Mining	ortation and Public Utilities uction Iture Submit Certificate of Assumed Business
Signature:  Secretary of State use only  Signature:  Printed Name:  OUNCE PAPER  Capacity/Title:  Signature:  Signature:  CX: 14449649661 CT: 266117 BH: 1386954  1 9 25.96 = 25.80 ASSUM NAME # 2	correspondence should be addresse Nestor Juarez 518 Oakley Ave	PO Box 83720 Boise ID 83720-0080
Signature: V/2  Printed Name: ASTOC MAREZ  Capacity/Title: ASTOC MAREZ  Capacity/Title: ASTOC MAREZ  Signature: Signature	_	edgment
Printed Name: 15702 14252  Capacity/Title: 1000000000000000000000000000000000000	Signature: V/2	Secretary of State use only
Capacity/Title: <u>Co-owner</u>	Printed Name: AFTOR JARF2  Capacity/Title: Cap	01/20/2012 05 = 00 CK: 14449649661 CT: 266117 BH: 1396954

ebn.pmd Rev. 07/2010

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