

## **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 MNY -9 AM 9: 25

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

SECRETARY OF STATE STATE OF IDEASO

	Productions
The true name(s) and <u>business</u> address(es) business under the assumed business nam <u>Name</u> Amanda L Brunmeier	
The general type of business transacted un  Retail Trade Transportation  Wholesale Trade Construction	der the assumed business name is: and Public Utilities
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: One Eye Productions c/o Amanda Brunmeier	Secretary of State 450 North 4th Street PO Box 83720
716 Bushnell St Caldwell, Idaho 83605	Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	ut .
	Secretary of State use only
iture: Umanda 7 Brunmpior	
ed Name: Amanda L Brunmeier	
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city/Title: Owner ture:	

abr.pmd Rev. 07/2010

25.08 = 25.00 ASSUM NAME # 2

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