

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2813 JUL 22 AM 8: 14

SECRETAIN OF BROVE STATE OF IDAMO

Please type or print legibly.  Instructions are included on back of appli-	cation.
The assumed business name which the undersigned use(s) in the transaction of business is:      Cardsand Key fobs. com	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  Somerli Pinnock	
☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture	ler the assumed business name is: and Public Utilities  Submit Certificate of
<ul><li>☐ Manufacturing</li><li>☐ Mining</li><li>☐ Finance, Insurance, and Real Estate</li></ul>	Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  CardsandKeyFobs.com  P.O. Box 232  Parker, ID 83438	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature: Someti Pinnock  Printed Name: Someri, Pinnock  Capacity/Title: Owner/Manager	Sacretary of State use only
Signature: Printed Name: Capacity/Title:	IDAHO SECRETARY OF STATE <b>07/22/2013 05:00</b> CK: 1484903 CT: 172099 BH: 1382849 1 0 25.00 = 25.00 ASSUM MANE 1 2

9/21/2012

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