

Signature:\_\_\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2016 SEP -9 AM 9: 03

1. The assumed business name which the undersigne UN derground INK Tattoo	SECRETARY OF STATE d use(s) in the transaction of pasiness is:
2. The individual and/or entity names and business ad the assumed business name (do not include the name to Society 1975) (Address)	
(Name) (Address)	
(Name) (Address)	
(Name) (Address)	
Joshva Evans  (Name) 677 Washington St.  (Address) Twin falls ID, 83301  (City) (State) (Zipcode)	Transportation and Public Utilities  Mining Finance, Insurance, and Real Estate  5. Name and address for this acknowledgment copy is (if other than # 4):  (Name)  (Address)  (Gity) (State) (Zipcode)
Printed Name:	Secretary of State use only  IDAHO SECRETARY OF STATE  09/09/2016 05:00  CK:1493 CT:328840 BH:1545561  16 25.00 = 25.00 ASSUM NAME #2

Rev. 08/2015