



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

**FILED EFFECTIVE**

2015 MAR 12 AM 9:04

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

SURVIVALIST OUTPOST

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

DAVID JONES

Complete Address

41639 N. MAPLESTONE AVE.  
MERIDIAN, ID 83644

3. The general type of business transacted under the assumed business name is:

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

Submit Certificate of  
Assumed Business  
Name and **\$25.00** fee to:

Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

4. The name and address to which future correspondence should be addressed:

DAVID JONES  
41639 N. MAPLESTONE AVE.  
MERIDIAN, ID 83644

5. Name and address for this acknowledgment copy is (if other than # 4 above):

SAME AS #4

Signature:

David Jones

Printed Name:

Capacity/Title:

Signature:

Printed Name:

Capacity/Title:

Secretary of State use only

IDaho SECRETARY OF STATE  
03/12/2015 05:00  
CK:20574156890 CT:158010 BH:1465904  
16 25.00 = 25.00 ASSUM NAME #2

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