

Signature:

Capacity/Title:

Printed Name:

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 MY 22 AM 9: Ln 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: Freak Alley Gallery 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Colby G. AKers 615 e Krail ST #1 Boise Il. 83712 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities ✓ Retail Trade Construction Wholesale Trade Services Agriculture Submit Certificate of Manufacturing Minina Assumed Business Finance, Insurance, and Real Estate Name and **\$25.00** fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street Coily AKERS 615 Expall &T HI Boise Id. PO Box 83720 Boise ID 83720-0080 208 334-2301 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): Secretary of State use only Signature: Printed Name: Colby AKers Capacity/Title: Fander / owner

IDAHO SECRETARY OF STATE

05/22/2012 05:00 CK: CASH CT: 158010 BH: 1325265 1 2 25.00 = 25.00 ASSUM NAME # 2

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