



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2018 MAY 14 AM 5:48

SECRETARY OF STATE
STATE OF IDAHO

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

ROK CUSTOM HOLSTERS

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

RYAN KELSO 1928 TAMARACK LOOP, TWIN FALLS, IDAHO 83301

(Name) (Address)

ONDREA KELSO 1928 TAMARACK LOOP, TWIN FALLS, IDAHO 83301

(Name) (Address)

(Name) (Address)

(Name) (Address)

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

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

4. Mailing address for future correspondence:

RYAN KELSO

(Name)

1928 TAMARACK LOOP

(Address)

TWIN FALLS ID 83301

(City) (State) (Zipcode)

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

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: RYAN KELSO

Signature: *Ryan Kelso*

Printed Name: ONDREA KELSO

Signature: *ONDREA KELSO*

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

05/14/2018 05:00

CK:5061 CT:357786 BH:1643788
10 25.00 = 25.00 ASSUM NAME #2

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