

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned OCT 25 PM 12: 37 submits for filing a certificate of Assumed Business Name.

<u>Please type or print legibly.</u> <u>Instructions are included on back of application.</u>

SECRETARY OF STATE STATE OF IDAHO

	OTATE OF IDAHO
The assumed business name which t business is:	the undersigned use(s) in the transaction of
SGT. FAND'S TACT	TICAL FIREARMS
The true name(s) and <u>business</u> address business under the assumed business Name	ess(es) of the entity or individual(s) doing ss name: <u>Complete Address</u>
TYSON INFANGER	
	BLACKFOOT, ID &3221
Retail Trade Transpo Wholesale Trade Constru	
Services	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed TYSON TNFANGER 1230 CARY DR.	d: 450 North 4th Street
SLACNFOOT, ID 8322.1 5. Name and address for this acknowled copy is (if other than # 4 above):	dgment
	Secretary of State use only
Signature: The Transport	—
Printed Name: TYSON INFANCER	
Capacity/Title: OWNER	
Signature:	10/25/2010 05:00
Printed Name: Capacity/Title:	CK: 365 CT: 158010 BH: 1244531 1 0 25.00 = 25.00 ASSUM NAME # 2
Vapacity/ ittle.	

abn.pmd Rev. 07/2010

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