Capacity: Manager

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINES (Please type or print legibly. See instructions on reverse.)	
To the SECRETARY OF STATE, STATE OF IDAHO  Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.	رانز
The assumed business name which the undersigned use(s) in the transaction of business is:	
- Straight Shots Sports Rub	
<ol> <li>The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:</li> </ol>	
Mancy Name  328 STATE ST WE SER, ID	
The general type of business transacted under the assumed business name is:  (mark only those that apply)	
Retail Trade	te
4. The name and address to which future correspondence should be addressed:	
Submit Certificate of Assumed Business Name and \$20.00 fee to:	7
Welsen, Id. 83672 Secretary of State	
5. Name and address for this acknowledgment  CODY is (feather than the control of	
Boise ID 83720-0080	
208 334-2301	<u> </u>
Secretary of State use only  5 5 7 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Signature: Manay Wase IDAHO SECRETARY OF STATE	
rinted Name: NANCY J. WALL 8 CK: 95 CT: 15679 BH: 443683	
Canacity: M. Chanacity 28.88 ASSIM NAME # 2	