

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.

2014 APR 28 PI1 12: 42

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

Tee Tease	
2. The true name(s) and <u>business</u> ad business under the assumed busir	ddress(es) of the entity or individual(s) doing ness name:
<u>Name</u>	Complete Address
Pixel and Line LLC	6134 W. Corporal Ln. Boise, ID
W/3030¢	6134 W. Corporal Ln. Boise, ID 83704
3. The general type of business trans	sacted under the assumed business name is:
<u> </u>	sportation and Public Utilities
	struction
	culture
Manufacturing Minin	ng Submit Certificate of
Finance, Insurance, and Rea	Assumed Business al Estate Name and \$25.00 fee to:
4. The name and address to which fu	utura
correspondence should be address	Secretary of State
6134 W. Corporal Ln.	
Boise, ID 83704	B0100 1B 007 20-0000
	208 334-2301
5. Name and address for this acknow	wledament
COPy is (if other than # 4 above):	
	Secretary of State use only
nature: Dan P	IDAHO SECRETARY OF STATE
nted Name: Dom Raninez	04/28/2014 05:00
pacity/Title: Owner	CK:1845644 CT:172099 BH:14 1@ 25.00 = 25.00 ASSUM NAM
gnature:	
ALICARDA CÁ.	

D170747

Printed Name: ____

Capacity/Title: