

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

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	The true name(s) and business address(e business under the assumed business name Name	nme: Complete Address		
	Tactical Solutions, LLC	218	1 Commerce Ave., Boise, ID 83705	:
	<u>(w26800)</u>			,,,
	The general type of business transacted u	nder the a	ssumed business name is:	. "
	Retail Trade Transportation Wholesale Trade Construction		aic Ounties	
	Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and \$25.00 fee to:	
	The name and address to which future correspondence should be addressed:		Idaho Secretary of State 450 N 4th Street PO Box 83720	
			Boise ID 83720-0080	4.
			(208) 334-2301	5.
			•	
5.	Name and address for this acknowledgm copy is (if other than # 4 above):	ent		
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			Secretary of State use only	
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	The IRP	and		
atı	Ire: (signature required)	pytomstabn formstabn.p65 Revised 04/2003	•	

(see instruction # 8 on back of form)

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CK: 5128 CT: 174235 BH: 1225715 1 8 25.88 = 25.88 ASSUM MANE #