Printed Name: N

Capacity/Title: \_\_\_\_\_\_\_

(see instruction # 8 on back of form)

## **CERTIFICATE OF** ASSUMED BUSINESS NAME 09 FEB 18 AM 8: 21

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business NameSECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The true name(s) and business address(es) of the business under the assumed business name:  Name  Outantian Live, Inc.	Complete Address  Parkway Boise ID 8370
The general type of business transacted under the	e assumed business name is:
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State
Correspondence should be addressed:  Quitand Line, The  IND Partmay  Roise ID 33706	450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	