

## 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.

Instructions are included on back of application.

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The assumed business name which the undoposition business is:      Www.onedirtyghilie.	· ,
www.cnearrygritate.com	
<ol><li>The true name(s) and <u>business</u> address(es business under the assumed business name</li></ol>	
<u>Name</u>	Complete Address
Interaxo Online LLC	1010 Formoor Dr
(W 130861)	Hailey, 1D 83333
The general type of business transacted un	der the assumed business name is:
Wholesale Trade Construction	and Public Utilities
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  Sonja Coleman  PO Box 4721  Hailey, ID 83333	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	it
	Secretary of State use only
Signature:	
Printed Name: Sonja Coleman	016795-5-
Capacity/Title: Owner	12141125
Signature:	
Printed Name:	IDAHO SECRETARY OF STATE @1/07/2014 @5:00
Capacity/Title:	CK: 146 CT: 263674 BH: 1494889 1 0 25.00 = 25.00 ASSUM NAME # 2