

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

10 MAY 14 AM 8: 32

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.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the under business is: The Pock Pistol	ersigned use(s) in the transaction of
2. The true name(s) and business address(es) business under the assumed business name Name St decision Services UC W 93332	Complete Address 105 Goodwin Dr Blackfoot Id. 83221
3. The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Ruas Williams 105 Goodwin 45. Blackfoot Td. 83221 5. Name and address for this acknowledgment copy is (if other than #4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
Signature:	Secretary of State use only 0 / 3 9 2 9