



CERTIFICATE OF ASSUMED BUSINESS NAME

12 APR 24 AM 8:37

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

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

POCKET PROS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

COMMERCIAL NEWSPAPER SERVICE INC

PO BOX 1788 NAMPA, ID 83653

(C 1102848)

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

MICHAEL CROW
504 16TH AVE SOUTH
NAMPA, ID 83651

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature: _____

Printed Name: LARRY SLUSSER

Capacity/Title: COO

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
04/24/2012 05:00
CK: 5863 CT: 269661 BH: 1321214
1 @ 25.00 = 25.00 ASSUM NAME # 4

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