Capacity/Title:__

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2012 AUG 29 PM 2: 53

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

	Grafix For U
The true name(s) and <u>business</u> ad business under the assumed business Name	dress(es) of the entity or individual(s) doing ness name: <u>Complete Address</u>
Brian Rasmussen	152 N Main Pocatello, ID 83204
Patricia Rasmussen	152 N Main Pocatello, ID 83204
✓ Retail Trade ☐ Trans ☐ Wholesale Trade ☐ Cons	acted under the assumed business name is: portation and Public Utilities truction
✓ Services	I Assumed Business I
 The name and address to which fur correspondence should be address. Grafix For U 	sed: 450 North 4th Street PO Box 83720
152 N Main	Boise ID 83720-0080 208 334-2301
Pocatello, ID 83204 5. Name and address for this acknow copy is (if other than # 4 above): Grafix For U 152 N Main	ledgment
Pocatello, ID	Secretary of State use only
nature:	
nted Name: Brian Rasmussen	

ibn.pmd Rev. 07/2010

08/29/2012 05:00 CK: 1115114 CT: 172099 BH: 1337880 1 0 25.00 = 25.00 ASSUM NAME # 2

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