

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.

FUST DESTRICTIVE

2013 AUG -6 AM 9: 05

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

2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name	The assumed business name which the unbusiness is: The Musical	ndersigned use(s) in the transaction of
Retail Trade	business under the assumed business nar Name	Complete Address 40 South 4th East
4. The name and address to which future correspondence should be addressed: Secretary of State 450 North 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): Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business
COPY is (if other than # 4 above): Secretary of State use only	Tulia W. Seare	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
C 1' as 0.		nt
Signature:	Capacity/Title: OWNER	Secretary of State use only
Printed Name: 08/06/2013 05:00 CK: 1691 CT: 286866 BH: 1384950	Printed Name:	Ø8/Ø6/2013 Ø5:00 CK: 1691 CT: 286886 BH: 1384958