

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2005 AUG - 1 14. 3157

Please type or print legibly. NOTE: See instructions on reverse before filing.

	THE O!ZONE a con	ondom shop / O!Z LLC
2.	The true name(s) and business address(es	s) of the entity or individual(s) doing
	business under the assumed business nan Name	
	Name	Complete Address
		1615 Broadway
		Boise, Idaho 83706
	KUBBER RAINBOW BOISEL	LC
2	W5257	
3 .	The general type of business transacted ur	nder the assumed business name is:
	✓ Retail Trade	n and Public Utilities
	Wholesale Trade Construction	rand Fubile Offities
	Services Agriculture	Submit Certificate of
	☐ Manufacturing ☐ Mining	Assumed Business
	Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4	The name and address to which future	Secretary of State
	correspondence should be addressed:	Secretary of State 700 West Jefferson
		Basement West
	The O!Zone	PO Box 83720
	1615 Broadway	Boise ID 83720-0080
	Boise, Idaho 83706	208 334-2301
5.	Name and address for this acknowledgme	ent Phone number (optional):
	COPy iS (if other than # 4 above):	
		Secretary of State use only
		100 Mg
		\$ \$
natu	(eignature required)	1500 1500
nted	Name: Caryn Thompson	# DMC #
		IDAHO SECRETARY OF ST
paci	ty/Title: Owner/President	IDAHO SECRETARY OF ST
	(see instruction # 8 on back of form)	_{1

CK: 3071 CT: 168886 BH: 824324 1 8 25.00 = 25.00 ASSUM HAME # 2

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