

Signature:____

CERTIFICATE OF ASSUMED BUSINESS NAME

2017 NOV 17 AM 9: 17

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

SECRETARY OF STATE STATE OF IDAHO

Filing fee: \$25.00.

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

1.	The assumed business name which the undersigned use(s) in the transaction of business is:							
	The Roxy Theater							
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):							
	Pottersville LLP 137 N Bridge Stree				int Antho	ny Idaho, 83445		
	(Name) (Address)							
	(Name)							
	(Name)	(Addre	(Address)					
	(Name) (Address)							
3.	The general type of business transacted under the assumed business name is:							
	☐ Retail Trade ☐ Wholesale Trade ☒ Services		Construction Agriculture Manufacturin		T	ransportation and Public Utilities Mining Finance, Insurance, and Real Estate		
4.	Mailing address for future correspondence:			5.	 Name and address for this acknowledgment copy is (if other than #4); 			
	137 N Bridge Street							
	(Name)				(Name)			
	(Address)				(Address)			
	Saint Anthony	Idaho	83445					
	(City)	(State)	(Zipcode)		(City)	(State) (Zipcode)		
Printed Name: Benjamin Clark						Secretary of State use only		
Sic	gnature:					•		
					IDAHO SECRETARY OF STATE			
Printed Name:Signature:						11/17/2017 05:00 TK:1084 CT:348577 BH:1612541 25.00 = 25.00 ASSUM NAME #2		
	nted Name:					7100166		
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