

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

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

## FILED EFFECTIVE

09 JUN 17 AM 8: 30

SECRETARY OF STATE STATE OF IDAHO

Four Seasons Sporting Goods	
2. The true name(s) and business address(es)	· · · · · · · · · · · · · · · · · · ·
business under the assumed business nam	
Name  Barefoot Tile LLC	Complete Address
	911 N State St, Grangeville, ID 83530
<u> </u>	
B. The general type of business transacted un	der the assumed business name is:
The general type of beamloss that loading and	
Retail Trade Transportation	and Public Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
☐ Finance, Insurance, and Real Estate	Name and <b>\$25.00</b> fee to:
	Idaho Secretary of State
4. The name and address to which future	450 N 4th Street
correspondence should be addressed:	PO Box 83720
Four Seasons Sporting Goods	Boise ID 83720-0080
223 E Main St	(208) 334-2301
Grangeville, ID 83530	
5. Name and address for this acknowledgme	nt
COPY IS (if other than # 4 above):	
	Secretary of State use only
	99d t
nature: Sunau Bolanu	S S S S S S S S S S S S S S S S S S S
(signature required)	34200
nted Name: Brady Beeson	IDAHO SECRETARY OF STATE
pacity/Title:Manager	F "
(see instruction # 8 on back of form)	CK: 1259 CT: 238844 BH: 117

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