

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

99 NOV -9 AM 11:10

SECRETARY OF STATE
STATE OF IDAHO

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

TOM SCOTT COMMUNICATION SHOP

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>THOMAS W. MOUSER</u>	<u>10696 N. SAGECREST PL. BOISE, ID 83703</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed: Phone number (optional): _____

TOM SCOTT COMMUNICATION SHOP
5257 FAIRVIEW AVE. - SUITE 110
BOISE, ID 83706

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
 700 West Jefferson
 Basement West
 PO Box 83720
 Boise ID 83720-0080
 208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

THOMAS W. MOUSER
10696 N. SAGECREST PLACE
BOISE, ID 83703

Signature: Thomas W. Mouser

Printed Name: THOMAS W. MOUSER

Capacity: OWNER

(see instruction # 8 on back of form)

Revision 2/87
a:\comp\form\alabn.pms

Secretary of State use only

IDAHO SECRETARY OF STATE

11/09/1999 09:00
CK: none CT: 122772 BH: 264877

1 @ 20.00 = 20.00 ASSUM NAME # 2

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