

CERTIFICATE OF

(see instruction # 8 on back of form)

Sent By: IDAHO SECRETARY OF STATE ; 3342080;

ASSUMED BUSINESS NAME APR 14 PM 2: 11

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name
SECRETARY OF STATE STATE OF ID/40 NOTE: See instructions on reverse before filing.

BLT.	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name T.A. K. LL.C. W.384/3	of the entity or individual(s) doing Complete Address P.O. BOX 370 PARMA, To 83660
3. The general type of business transacted und Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
PARMA, In 83660 5. Name and address for this acknowledgment copy is (if other than # 4 above): SAME	208 334-2301 Phone number (optional): (208) 722-6688
	Secretary of State use only Secretary of State use only Secretary of State use only

IDAHO SECRETARY OF STATE **94/14/2005 95:00**CK: 513559 CT: 172099 BH: 804683

1 8 25.00 = 25.00 ASSUM NAME # 3