

CERTIFICATE OF **ASSUMED BUSINESS NAME**

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

FILED EFFECTIVE

2005 APR 21 AM 9: 38

STATE OF IDAHO

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

Tuxe	edo Enterprises
The true name(s) and business address business under the assumed business in Name John Nelson	
Linda Nelson	101 Cottage Grove/Box 134 Mullan, ID 83846
3. The general type of business transacted ✓ Retail Trade ☐ Transporta ☐ Wholesale Trade ☐ Construction	ation and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Est	Assumed Business
The name and address to which future correspondence should be addressed: John & Linda Nelson	Secretary of State 700 West Jefferson Basement West PO Box 83720
P. O. Box 134 Mullan, ID 83846	Boise ID 83720-0080
5. Name and address for this acknowledge copy is (if other than #4 above):	gment Phone number (optional):
	Secretary of State use only
ignature:	1DAHO SECRETARY OF STATE 04/21/2005 05:00 05:400