

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2005 FEB -3 PH 2: 16

STATE OF TOAHOUSE

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.

Printed Name: Unlianne Hoffkinds

(see instruction # 8 on back of form)

Capacity/Title: owner

2. The true name(s) and business address(es) of the business under the assumed business name: Name Fulcanne Hofflander Po Todd Hofflander	Complete Address
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining	
Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Tata Espresso Po Box 124 Puggina, TD 83547	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above.)	Phone number (optional): (208)628-9222

CK: 92568418526 CT: 158818 BH: 798976 1 8 25.88 = 25.88 ASSUM MANE # 2