

Printed Name:

Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

IDAHO SECRETARY OF STATE

12/30/2002 05:00

CK: 9243 CT: 166192 BH: 653924

1 B 20.00 = 20.00 ASSUM MAME # 2

D61051

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

2002 DEC 30 PM 2: 13

Please type or print legibly.

NOTE: See instructions on reverse before filing.

	·
The true name(s) and business address(es) of the business under the assumed business name:	he entity or individual(s) doing
Name	Complete Address
	•
Luser Service Inc. 7 C 131338	40 Park Ave, Idaho Falls, IO 834
3. The general type of business transacted under t	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Advanced Business Systems 104 S. Emerson Suite C.	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	Phone number (optional):
COPY IS (if other than # 4 above).	
COPY IS (if other than # 4 above).	Secretary of State use only