

CERTIFICATE OF ASSUMED BUSINESS NAME

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

O7 DEC -3 PM 1: 14
SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersigned business is: TV CONSTRUCTION	
	complete Address SI RED ASH #18 ALLEY, FD 83333
3. The general type of business transacted under the a	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	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):	Phone number (optional): 208. 721. 1348
Signature:	Secretary of State use only
Printed Name: Nose VICA PONA	IDAHO SECRETARY OF STATE
Printed Name: Nose Viva Pona Capacity/Title: OWNER (see instruction # 8 on back of form)	12/03/2007 05:00 CK: 1035 CT: 158010 BH: 1088016 1 2 25.80 = 25.00 ASSUM NAME # 2

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