

## **CERTIFICATE OF** ASSUMED BUSINESS NAME-ILED EFFECTIVE

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

11 APR -4 AM 9: 14

## Please type or print legibly. Instructions are included on back of application.

SELECT OF OF CTATE

1)146555

The assumed business name which the under business is:	ersigned use(s) in the transaction of
THOMPSON TOOL	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name Ph. 20% 452-4004  Paul Thompsol	e: <u>Complete Address</u>
3. The general type of business transacted und  Retail Trade Transportation a  Wholesale Trade Construction Services Agriculture  Manufacturing Mining	and Public Utilities  Submit Certificate of
Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Paul Thompson  1565 FAIRUIEW AVE	Assumed Business Name and \$25.00 fee to:  Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature: Verel Thompson	Secretary of State use only
Printed Name: PAUL THOMPSON  Capacity/Title: OwnER  Signature: OwnER	IDAHO SECRETARY OF STATE
Printed Name:	04/05/2011 05:00 CK: 2103 CT: 158010 DH: 1267762 1 0 25.00 = 25.00 ASSIM NAME # 2
Capacity/Title:	