



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-04, 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.**

**FILED EFFECTIVE**

MAY 13 PM 3:51

STATE

IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Tile Outlet Always in Stock

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

ZCA Inc.

Complete Address

1891 Colt Lane, Gardnerville, NV 89410

C 160415

3. The general type of business transacted under the assumed business name is:

- |                                                              |                                                              |
|--------------------------------------------------------------|--------------------------------------------------------------|
| <input checked="" type="checkbox"/> Retail Trade             | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade          | <input type="checkbox"/> Construction                        |
| <input type="checkbox"/> Services                            | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |                                                              |

4. The name and address to which future correspondence should be addressed:

Jeremy L. Jensen

1891 Colt Lane

Gardnerville, NV 89410

Submit Certificate of  
Assumed Business  
Name and \$25.00 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 the acknowledgment copy is (if other than # 4 above):

Phone number (optional):

(775) 450-2665

Signature: Jeremy L. Jensen

Printed Name: \_\_\_\_\_

Jeremy L. Jensen

Capacity/Title: \_\_\_\_\_

President

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE  
05/13/2005 05:00  
CK: 72749 CT: 12965 IN: 810427  
1 @ 25.00 = 25.00 ASSUM NAME 83

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