227

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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

05 JAN 14 PH 12: 28

SECRETA OF STATE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Idaho Comp	uter Forensic Servic	ces	
The true name(s) and business address business under the assumed business in Name	name:		
John E. Ode		Complete Address POB 44423 Boise ID 83711	
. The general type of business transacted Retail Trade Transporta Wholesale Trade Agriculture	tion and Public L	Itilities	
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Esta		Submit Certificate of Assumed Business Name and \$25.00 fee to:	
The name and address to which future correspondence should be addressed: John E. Ode	7	Secretary of State 700 West Jefferson Basement West PO Box 83720	
POB 44423		Boise ID 83720-0080	
Boise ID 83711		208 334-2301	
 Name and address for this acknowledged copy is (if other than #4 above). 	ment Ph	one number (optional); 208-484-5455	
	_	Secretary of State use only	
ature:	gi-copi/orms/abn forms/abn.p65 Revsed 04/2/X/3		
acity/Title:Owner	Rev	IDAHO SECRETARY OF STATE	
(see instruction # 8 on back of form)	7:6	01/14/2004 05:	

01/14/2004 05:00 CK: 11423173345DNF CT: 172899 BH: 721797 1, 8 25:00 = 25:00 ASSUM NAME # 2

078135