

CERTIFICATE OF ASSUMED BUSINESS NAME

FI MOVEFFECTIVE

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

Nov 7 | 1 3s AM '0|

Please type or print legibly. NOTE: See instructions on reverse before filing.

 The assumed business name which the und business is: Burns Technical Con The true name(s) and <u>business</u> address(es) of the business and the second and the second	nmunications
Name Name	Complete Address
William Burns	P.O. Box 7203 Boise, Ideho 83707
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	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
 Name and address for this acknowledgment copy is (if other than # 4 above): 	Phone number (optional):
	Secretary of State use only
inted Name: William Burns apacity: Owner (see instruction #8 on back of form)	1000000 Understand of State 11/07/2001 055 = 00 CK: 758 CT: 153316 BH: 428456 1 2 28.88 = 28.88 ASSUM MANE 1

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