

## FILED EFFECTIVE **CERTIFICATE OF** ASSUMED BUSINESS NAME

2012 JAN 17 AM 10: 48

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

STATE OF IDAHO

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

	All D
	NLP
. The true name(s) and <u>business</u> address(e business under the assumed business na Name  Aall American Credit Card Solutions, Inc	• • • • • • • • • • • • • • • • • • • •
	on and Public Utilities
<ul> <li>Wholesale Trade ☐ Construction</li> <li>Services ☐ Agriculture</li> <li>Manufacturing ☐ Mining</li> <li>Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed:  Dan Harrington, President	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
NLP 7253 W Franklin Rd, Boise, ID 83709	208 334-2301
i. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
	Secretary of State use only
nature:	
ited Name: Dan Harrington	,
pacity/Title: President	IDANO SECRETARY OF STATE
nature:	. 91/17/2012 05:00 CK: 879286 CT: 172899 BH: 138626
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