

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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

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SECRETARY OF STATE STATE OF IDAHO

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The assumed business name which the ubusiness is:	ndersigned use(s) in the transaction of			
Idaho TaxR	tesalution Center			
2. The true name(s) and <u>business</u> address(e business under the assumed business na Name LeBeau & Associates, Chtd. C 12/332				
3. The general type of business transacted uses a large and the second s	Submit Certificate of Assumed Business			
The name and address to which future correspondence should be addressed: Idaho TaxResolution Center 77 E. Idaho, Ste 200	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301			
Meridian, ld 83642 5. Name and address for this acknowledgme copy is (#other than # 4 above):	ent			
Signature:	Secretary of State use only			
Printed Name: Daniel K. LeBeau				
Capacity/Title: Pres.				
Signature:				
Printed Name:	IDAHO SECRETARY OF STATE 05/13/2011 05:00			
Capacity/Title:	CK: 678896 CT: 172899 BH: 1273681 1 8 25.80 = 25.80 ASSUM NAME # 2			

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