

## 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.

NOTE: See instructions on reverse before filing.

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SECALIARY OF STATE STATE OF IDAHO

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The assumed business name which the und business is:  V.K. COMPUTER MAINTEN	- , ,
2. The true name(s) and business address(es) business under the assumed business name Name  Dovacio J. Van Kleeck	· · · · · · · · · · · · · · · · · · ·
3. The general type of business transacted und	er the assumed business name is:
Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  DONALD J. Van Kleeck  16 95 SH 46 GOODING, FD 83330	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
<ol> <li>Name and address for this acknowledgment copy is (if other than #4 above):</li> </ol>	Phone number (optional): (208) 731-8526
	Secretary of State use only
Signature: Signature required)	IDAHO SECRETARY OF STATE  ### ### ### ### ### ### ### ### ### #
Printed Name: DONALD J. JAN KLECK	IDAHO SECRETARY OF STATE  ### ### ### ### ####################
Capacity/Title: OWNER (see instruction # 8 on back of form)	CK: 921 CT: 158010 BH: 733637 1 8 25.00 = 25.00 ASSUM NAME # 2