## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

(Ficase type of pillit legibly. See matructions of reverse.)
To the SECRETARY OF STATE, STATE OF IDAHO  Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
assumed business name which the undersigned use(s) in the transaction of iness is:
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1.	The assumed business name which the und business is:	dersig	ned us	e(s) in the transaction of	
	TechDog				
2.	The true name(s) and business address(es business under the assumed business name	e is/ar	e: <u>Con</u>	nplete Address	
	Sandra E. Billings	1001	Beul	ah Rd., Troy, ID 83871	
3.	The general type of business transacted un (mark only those that apply)	der the	e assu	med business name is:	
	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	J		nsportation and Public Utilities ance, Insurance, and Real Estate ing	
4.	The name and address to which future Phone number (optional): 208-835-8292 correspondence should be addressed:				
	Sandra E. Billings			Submit Certificate of	
	1001 Beulah Rd.			Assumed Business Name and <b>\$20.00</b> fee to:	
	Troy, ID 83871				
5.	Name and address for this acknowledgmen copy is (if other than # 4 above).	t		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
			,	Secretary of State use only	

Signature:  $\sum \mathcal{E} \mathcal{F}$ 

Printed Name: Sandra E. Billings

President/Owner Capacity:

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

U6/01/2000 09:00 CK: 822 CT: 131828 BH: 322884

1 @ 20.00 = 20.00 ASSUM NAME # 2

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