

CERTIFICATE OF ASSUMED BUSINESS NAME

10 AUG 11 AM 8: 15

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

SECRETARY OF STATE STATE OF IDAHO

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

	itution Plaza
the true name(s) and <u>business</u> address(e business under the assumed business na <u>Name</u>	ame: Complete Address
Thomas Investments Limited Partnership L 2-995	413 W. Idaho, Suite 200, Boise, ID 83702
Wholesale Trade Construction	on and Public Utilities
✓ Services	Submit Certificate of Assumed Business Name and \$25.00 fee to:
 The name and address to which future correspondence should be addressed: Constitution Plaza 	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
413 West Idaho, Suite 200 Boise, ID 83702	208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
nature:	Secretary of State use only
nted Name: Thomas C. Mannschreck	
pacity/Title: General Partner	
nature: nted Name:	- IDAHO SECRETARY OF STATE 98/11/2010 95:0
ILGU I 14.111G	CK: 1791 CT: 92306 BH: 1234 1 @ 25.00 = 25.00 ASSUM NAM