



CERTIFICATE OF ASSUMED BUSINESS NAME

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

07 NOV 13 PM 1:12

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

TSI Dental

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Tech Support Inc.

3777 E. Alta Ridge Dr., Boise, ID 83716

C 122473

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

4. The name and address to which future correspondence should be addressed:

TSI Dental

3777 E. Alta Ridge Dr.

Boise, ID 83716

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature:

Candice Hadley
(signature required)

Printed Name:

Candice Hadley

Capacity/Title:

Vice president

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
11/13/2007 05:00
CX: 1690 CT: 158816 BH: 1885134
1 @ 25.00 = 25.00 ASSUM NAME # 2

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Revised 04/2003

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