

(see instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED, EFFECTIVE

Please type or print legibly. NOTE: See instructions on reverse before filing.

1. The assumed business name which the und business is:	lersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) business under the assumed business name: Name James D. Wallace ———————————————————————————————————	of the entity or individual(s) doing <u>Complete Address</u> 2018 Ivy 5T Nampa I.D. 83686
Wholesale Trade ☐ Construction Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: T-Wall Sucs. 2018 Try 5T Nampa ID. 83686	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmen copy is (if other than # 4 above): 	t Phone number (optional): 208 - H67-I593
	Secretary of State use only
Signature: Jim Wallace Printed Name: James D Wallace Capacity: Oldner	IDAHO SECRETARY OF STATE 1/99/2002 05 = 00 CK: 6671358240 CT: 155482 BH: 438853 1 2 20.00 = 20.00 ASSUN NAME # 2
(see instruction # 8 on back of form)	