	CERTIFICATE OF ASSUM (Please type or print legibly. S	MED BUSINGE INSTRUCTIONS OF	LESS NAME	
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. STATE, OF STATE The second during the state of				
1.	The assumed business name which the unbusiness is: Tykerian Soft	dersigned use(s) in the transaction of AHO	
2.	2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address Michael B. Lydon 11915 W. Buckerry C+, Boise 83709			
		TIVE OF CREEK	<u> </u>	
3.	The general type of business transacted ur (mark only those that apply)	nder the assumed	d business name is:	
	Retail Trade	· — ·	portation and Public Utilities be, Insurance, and Real Estate	
correspondence should be addressed:			otional): <u>208 378 8446</u>	
	Michael B. Lydon 11915 W. Bheberry Ct.	As	ubmit Certificate of ssumed Business ame and \$20.00 fee to:	
	Boisa IO 83709		ecretary of State 00 West Jefferson	
5.	Name and address for this acknowledgmer copy is (if other than # 4 above):	et Ba	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
		I _	Secretary of State use only	
Signature: Michael B. Lydon		Revision 12/88	IDAHO SECRETARY OF STATE	
Printed Name: Michael B. Lydon		1 2 CX	0/02/2000 09:00 : 4038 CT: 136785 BH: 352025	
Capacit	(see instruction # 8 on back of form)	990' vqansamoa,doo,tb	e 28.88 = 28.88 ASSUM NAME # 2	

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