

## CERTIFICATE OF FILED/EFFECTIVES ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned 2003 DEC 23 M 8: 37

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

The assumed business name which the under business is:	ersigned use(s) in the transaction of
Torchsounds E	Entertainment
The true name(s) and business address(es) business under the assumed business name     Name     Paul M Hroma	e: Complete Address 3136 N Burley Way
	Meridian, ID 83642
3. The general type of business transacted und  Retail Trade Transportation  Wholesale Trade Construction	der the assumed business name is: and Public Utilities
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
<ol> <li>The name and address to which future correspondence should be addressed:</li> <li>3136 N Burley Way</li> </ol>	Secretary of State 700 West Jefferson Basement West PO Box 83720
Meridian, ID 83642	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):  208-412-1646
	Secretary of State use only
Signature: (signally/का/अध्यक्षिकेवा)  Printed Name: निया निरामक  Capacity/Title: Owner  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  12/23/2003 05:00  CK: 513052169 CT: 158010 BH: 718299  1 @ 25.00 = 25.00 ASSUM NAME # 2