



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

2007 JAN 31 AM 9:14

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:

The Added Touch

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

Name

Maria Techner

Complete Address

2020 W. Tango Creek Dr.
Meridian ID 83646

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

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

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

Maria Techner
2020 W. Tango Creek Dr.
Meridian ID 83646

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

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

Signature: Maria Techner
(Signature required)

Printed Name: Maria Techner

Capacity/Title: Owner

(see instruction # 8 on back of form)

corpform100.pdf
Revised 04/2003

Secretary of State use only

1/31/2007 05:00
CK: 5929 CT: 158910 BH: 1029799
1 @ 25.00 = 25.00 ASSUM NAME # 2

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