

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY MARIE CHILL

1. The assumed business name which the up business is: A + Chip Repair	
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name Name Nordan	s) of the entity or individual(s) doing me: Complete Address 2159 Rusty Ct. Twin Falls T. D.
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Tyler Tordan 2159 Rusty Ct. Twin Falls T.D. 8330/	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
5. Name and address for this acknowledgmer copy is (if other than # 4 above): # Signature: Signature:	Secretary of State use only
Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE ##################################