

(see instruction # 8 on back of form)

Capacity/Title: OWNER

CERTIFICATE OF ASSUMED BUSINESS NAME

| | DE ZOO |
|---|---|
| CERTIFICATE (ASSUMED BUSINE) Pursuant to Section 53-504, Idaho Coo submits for filing a certificate of Assume | SS NAME |
| Please type or print legibly NOTE: See instructions on reverse b | |
| The assumed business name which the business is: Moser Designs | undersigned use(s) in the transaction of |
| The true name(s) and business address(business under the assumed business na Name | es) of the entity or individual(s) doing ame: |
| CHRIS V. MOSER | Complete Address 250 Fast James Court |
| | APT. #303 MERIDIAN IN 93642 |
| 3. The general type of business transacted ι | 3 3 2 12 |
| Retail Trade Transportation Wholesale Trade Construction Services Agriculture | on and Public Utilities |
| ManufacturingMiningFinance, Insurance, and Real Estate | Submit Certificate of Assumed Business Name and \$25.00 fee to: |
| The name and address to which future correspondence should be addressed: CHRIS V. MOSER 250 E. JAMES G. # 303 MERIDIAN, ID 83642 | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| Name and address for this acknowledgme copy is (if other than # 4 above). | ent Phone number (optional): 208-631-1838 |
| | mo-10-16-18-38 |

IDAHO SECRETARY OF STATE **01/06/2004 05:00** CK: 1838 CT: 158018 BH: 720064 8 25.00 = 25.00 ASSUM MANE # 2