CERTIFICATE OF ASSUMED BUSINESS NAME

-	il i
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.	
the transaction of	
The assumed business name which the undersigned use(s) in the transaction of	
hydinges is:	
Dusiness io.	
Professional Glass & Mirror	
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/lare:	
<u>Name</u>	19 Kinharly Road Twin Falls
Terra Forma, Inc 20	10 83301
(4 41 929)	
(C-141829)	
sur-in-ne transacted unde	rithe assumed business name is
3. The general type of business transacted undertthe æssammed business nameits:	
6, 1, 9	
See categories on the reverse	
4. The name and address to which correspondence should be addressed:	
4. The name and address to which correspondents	
Terra Forma, Inc	
2019 Kimberly RD	
Twin Falls ID 83301 R	
TWIN PORTS ITS Signed King Towlus	
Signed	
By Bryan toulus	
Capacity	TRESIDENT
, v <u></u>	
	·
Submit Certificate of Assumed	Customer #
Business Name and \$20.00 fee to:	Secretary of State use only
Dusiness items	
Secretary of State	IDAHO SECRETARY OF STATE 1
Secretary of Glaco	91/03/2002 05:00
700 West Jefferson	CK: 6852 CT: 155242 BH: 437835
PO Box 83720	
Boise ID 83720-0080	0,-0001
	D 50824
	l eg