

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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Please type or print legibly. NOTE: See instructions on reverse before filing. SECTL STATE STATE TO STATE

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The assumed business name which the undersig business is:	
The true name(s) and business address(es) of the business under the assumed business name: Name ALOUNTHONG THAMMAVONGSA	the entity or individual(s) doing Complete Address 2003 S. CRESSIDA PL BOISE, ID 83709
The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Wholesale Trade Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: TWA THAMMAVONGSA 2003 S. CRESSIDA PL BOISE, ID 83709	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 acknowledgment copy is (if other than # 4 above).	
Signature: (signature fequred) Printed Name: ALOUNTHONG THAMMAVONGSA Capacity/Title: OWNER (see instruction # 8 on back of form)	Secretary of State use only Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE O7/08/2005 05: CK: CASH CT: 158810 BH: 8 1 9 25.00 = 25.00 ASSUM N

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