



**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
123 PM 2:46

Please type or print legibly.

NOTE: See instructions on reverse before filing

DATE
10-10-1940

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Business is: Lin Thomas Computer Service

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

Linden F Thomas Name

Complete Address

128 10th Ave N TF ID 83301

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

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

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

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

Lina Thomas
128 10th Ave N
Twin Falls ID 83301

Phone number (optional):

208734-6657

Signature:

(signature required)

Printed Name: Linden K. Thomas

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

IDaho SECRETARY OF STATE
02/24/2004 05:00
CK: 1001 CT: 176805 BH: 728965
1 @ 25.00 = 25.00 ASSUM NAME # 3

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