

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

D165146

SECRETARY OF STATE

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

Please type or print legibly.

Instructions are included on back of application.

Photos Systems T	hornton Systems
2. The true name(s) and <u>business</u> address(e business under the assumed business na Name Clena Thornton	es) of the entity or individual(s) doing time: Complete Address S Jackson St Bolse, ID 83705
3. The general type of business transacted use Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Thorrton Systems 8 Jackson SF Boise ID 83705 5. Name and address for this acknowledgment copy is (if other than # 4 above): Same as .4	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
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inted Name: Glean Thoraton apacity/Title: sole proprietorship/ow	
apacity/Title: <u> აა!ი proprieforsh p/ა</u> ლ ignature:	IDAHO SECRETARY OF STATE 98/14/2013 95:00 CK: CASH CT: 286357 BH: 1385948 1 0 25.00 = 25.00 ASSUM NAME # 2
g.,	

abn.pmd Rev. 07/2010

Printed Name:

Capacity/Title: