



# CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVE

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

2004 JUN 21 A 9:30

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE  
STATE OF IDAHO

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

Mirror Image Enterprise

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

Name

Mike Olson

Katir Upchurch

Complete Address

66 Grays Ln Nampa ID 83687

70 Grays Ln Nampa ID 83687

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

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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

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

5226 Chinden Blvd  
Garden City ID 83714

5. Name and address for this acknowledgment copy is (if other than # 4 above):

5226 Chinden Blvd  
Garden City ID 83714

Phone number (optional):

208 409 1007

Secretary of State use only

Signature: Katir Upchurch

(signature required)

Printed Name: Katir Upchurch

Capacity/Title: Vice President

(see instruction # 8 on back of form)