

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

03 AUG 11 PH 4: 02

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

The assumed business name which the und business is:	
TECHNICAL SUPPORT SE	RVICES
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Lisa Hoswell	of the entity or individual(s) doing e: <u>Complete Address</u> 1321 W Мактім Sr. Выза, lo 8370С.
The general type of business transacted und	ler the assumed business name is:
	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson
1321 W MARTIN STREET BOISE, IDAHO 83706	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmen copy is (if other than # 4 above): 	Phone number (optional):
	Secretary of State use only
	IDAHO SECRETARY OF STATE 98/12/2003 05 = 00 CK: 1507 CT: 150010 RH: 695001 1 0 25.00 = 25.00 ASSUM NAME # 2
Signature: (signature required)	IDAHO SECRETARY OF STATE
Printed Name: LISA HOSWELL	IDAHO SECRETARY OF STATE 98/12/2003 05:00 CK: 1587 CT: 158818 BH: 695881 1 8 25.88 25.88 05518 HOME 1 2
Capacity/Title: RESIDENT	§