

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned MAR 24 Pli 12: 14

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

(see instruction # 8 on back of form)

STATE OF WAHO

2. The true name(s) and <u>business</u> address business under the assumed business	s(es) of the e	ntity or individual(s) doing	
<u>Name</u>		Complete Address	
Cirana Thomas	10:21	us verbung, Merilian,	<u>vci</u> . 8564i
Theres 13. Thomas	<u> 1051 C</u>	o Verbeira, Mundiam, Jo.	<u> </u>
			-
3. The general type of business transacte	d under the a	ssumed business name is:	
Retail Trade Transport	ation and Pub	lic Utilities	
☐ Wholesale Trade ☐ Construc	ion		
Services Agricultur	e	Submit Certificate of	
☐ Manufacturing ☐ Mining		Assumed Business	
Finance, Insurance, and Real Es	tate	Name and \$25.00 fee to:	
4. The name and address to which future		Secretary of State	
correspondence should be addressed:		700 West Jefferson	
Torrance Typing		Basement West PO Box 83720	
1081 W VELDENG	_	Boise ID 83720-0080	
Merican 20 33643		208 334-2301	
Name and address for this acknowled	ament	Phone number (optional):	
COPY is (if other than # 4 above):	gillorit	208-855-0919	
		900 072 0 11 1	
		Secretary of State use only	II
	10		
P. 11	gricorp/formslabn formslabn.p65 Revised 04/2003		
Signature: <u>Jovano Jhoma</u> (signature required)	Cormstabn formst	IDAHO SECRETARY OF STA 03/24/2005 05	
Printed Name: Take and The see	stabn eed 0	CV 2354 CT 455046	= 66 888288
Printed Name: To brance Thoma	-2. ≝ :₹	1 @ 25.00 = 25.00 ASSUM	NAME # 2