



**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

09 AUG -6 PM 2:22

SECRETARY OF STATE
STATE OF IDAHO

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

VUI LLC

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

Name	Complete Address
Tech Inflections L.L.C	5121 N. Lawsonia Pl
(W81420)	Boise, ID 83713

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

<input 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	

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

Alan Scott Walker
5121 N. Lawsonia Pl.
Boise, Idaho 83713

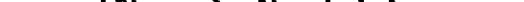
Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

**Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080**

(208) 334-2301

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

Secretary of State use only

Signature: 

(signature required)

Printed Name: Alan Scott Walker

Capacity/Title: Partner

(see instruction # 8 on back of form)

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IDaho SECRETARY OF STATE
08/06/2009 05:00
CK: 4401 CT: 234667 BH: 1181868
1 @ 25.00 = 25.00 ASSUM NAME B 2

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