FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME SECRETARY STATE OF IDAHO

2011 MAY 12 PM 2: 46

designation.

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.

The true name(s) and <u>business</u> add business under the assumed busin Name	dress(es) of the entity or individual(s) doing ness name: Complete Address
Tami Copper	2867 N Ridge Haven Way
	Meridian, !D 83646-7279
Retail Trade Transp Wholesale Trade Const	acted under the assumed business name is: portation and Public Utilities truction
Services Agricu Manufacturing Mining Finance, Insurance, and Real	g Submit Certificate of
 The name and address to which fut correspondence should be address Tami Cooper 	sed: 450 North 4th Street PO Box 83720
2867 N Ridge Haven Way	Boise ID 83720-0080 208 334-2301
Meridian, ID 83646-7279 5. Name and address for this acknowle copy is (if other than #4 above):	ledgment
gnature: Tam & Cooper	Secretary of State use only
nted Name: Taml L Cooper	
pacity/Title: Owner	
inature:	
inted Name:	
pacity/Title:	

IDAHO SECRETARY OF STATE 05/12/2011 05:00 CK: 676838 CT: 172899 BH: 1273486 1 0 25.00 = 25.00 ASSUM NAME \$ 2

