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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bu Please type or print legibly. NOTE: See instructions on reverse befor 1. The assumed business name which the und business is: TAN Travestments	e filing. e filing. C7 MAR - 5 AH 10: 17 SECREMARY OF STATE STATE OF IDAHO
 2. The true name(s) and <u>business</u> address(es) business under the assumed business name <u>Name</u> <u>Dominique</u> <u>Florea</u> <u>Tom Monone</u> 3. The general type of business transacted under the second second	e: <u>Complete Address</u> <u>6042 Pont Stapt 103</u> <u>Boise IN 83703</u> <u>470 6th Avenue 95062</u> Santa CN43, CA
5. Name and address for this acknowledgme COPY is (if other than # 4 above): Signature: (signature required) Printed Name: Capacity/Title: (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE O3/05/2007 05:00 IBAHO SECRETARY OF STATE 03/05/2007 05:00 CX: CASH CT: 150010 BH: 1037122 1 8 25.00 = 25.00 ASSUM NAME # 2 D108868