CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

03 MAY -9 PM 2:49
SECRETARY OF STATE
STATE OF IDAHO

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

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

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
Monika Boyll	1415 Joyce Boise Id. 83706

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

- [x] Retail Trade
- [ ] Wholesale Trade
- [x] Services
- [ ] Manufacturing
- [ ] Finance, Insurance, and Real Estate
- [ ] Transportation and Public Utilities
- [ ] Construction
- [ ] Agriculture
- [ ] Mining

4. The name and address to which future correspondence should be addressed:
   Monika Boyll
   P. O. Box 8632
   Boise Id. 83707

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Phone number (optional):

Signature: Monika Boyll
(signature required)

Printed Name: Monika Boyll

Capacity/Title:
(see instruction # 8 on back of form)

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Revised 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE
05/09/2003 05:00
CK: CASH CT: 158010 BH: 679800
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 65285