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CERTIFICATE OF ASSUMED BUSINESS NAM Pursuant to Section 53-504, Idaho Code, the unders submits for filing a certificate of Assumed Business N Please type or print legibly. NOTE: See instructions on reverse before filing.	Name. SECRETARY OF STATE STATE OF IDAHO
1. The assumed business name which the undersigne business is: <u>Thompson</u> 2 Associates G	Vaphic Design
 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 <u>Luke Thompson</u> <u>Thompson's Associates Gaptic</u> <u>Design</u> <u>P.O. Box 3155 Haydon, ID</u> 3. The general type of business transacted under the assumed business name is: 	
Retail Trade Transportation and Put Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Thompson & Associates Graphic Design	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720
P.O. Box 3155 Boise ID 83720-0080 Haydon, Id 83835 208 334-2301 5. Name and address for this acknowledgment copy is (if other than #4 above): Secretary of State use only	
Signature: Signature: Printed Name: <u>LUKC Thum pson</u> Capacity/Title: <u>Principal</u> (see Instruction # 8 on back of form) (see S. 98 and CT1 216595 BH: 1871295 1 8 25.98 and CT1 2	

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