Capacity/Title: Managing Member

## CERTIFICATE OF ASSUMED BUSINESS NAME 2011 APR 25 PM 2: 02

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

SESTALL DE TEARD

## Please type or print legibly. Instructions are included on back of application.

<ol> <li>The assumed business name which the ubusiness is:</li> <li>Boule</li> </ol>	undersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(business under the assumed business name  Name  T & A Design Team, LLC  (W/01783)	(es) of the entity or individual(s) doing ame: <u>Complete Address</u> 7215 Bay Meadows Dr. Nampa, Idaho 83687
3. The general type of business transacted    Retail Trade	sion and Public Utilities  Submit Certificate of  Assumed Business
Caldwell, Idaho 83605  5. Name and address for this acknowledgr copy is (If other than # 4 above):	nent
ignature: Tonia Hemment apacity/Title: Managing Member signature: Tonia Hemment signature: Managing Member signature: Andrea Beecroft	Secretary of State use only

IDAHO SECRETARY OF STATE 04/25/2011 05:00 CK: 661956 CT: 172099 BH: 1270724 1 0 25:00 = 25:00 ASSUM MANE # 3

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