

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED ENTE

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

2004 AUG 25 AM 8: 36

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

STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and <u>business</u> address(es) or business under the assumed business name: Name Thomas S Anderson L. Lokee Anderson Anderson	Complete Address
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	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
Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State use only
Signature: <u>Jon Augerson</u> Printed Name: <u>Jon Anderson</u> Capacity/Title: <u>owner</u> (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 98/25/2004 05 = 00 CX: 5366 CT: 158010 BH: 762697 1 9 25.00 = 25.00 ASSUM MANE # 2