

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.



03 JUN 20 PM 12: 04 SECRETARY OF STATE STATE OF IDAHO

T.E.N.	olutions	
The true name(s) and business address(es) of the e business under the assumed business name:		individual(s) doing plete Address Grove #12, Boise, ID 83709
Norma F. Cussins	445 S. Maple Grove #12, Boise, ID 83709	
Wholesale Trade✓ Services✓ ManufacturingConstructionAgricultureMining	and Public Utili Sut Ass	
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Everett F. Cussins 445 S. Maple Grove #12 Boise, ID 83709	Sec 700 Bas PO Boi	cretary of State West Jefferson sement West Box 83720 se ID 83720-0080 3334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	nt Phor	ne number (optional): 208.323.2570
		Secretary of State use only
ignature:	g/corp/formstabn p65 Revised 04/2003	D144513
rinted Name: Everett Cussins, Norma Cussins Capacity/Title: Co-Owners (see instruction # 8 on back of form)	g kerpformsk Reviser	IDANO SECRETARY OF STATE 06/20/2003 05 = CK: 5685 CT: 158010 BH: 60 1 0 25.00 = 25.00 ASSUM MA