



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/EFFECTIVE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2003 JUN 13 11:09:48

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

Thorne & Associates

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

Amy Thorne

4715 E. Comish

Stephen Thorne

Idaho Falls, ID 83406

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

- | | |
|--|--|
| ☐ Retail Trade | ☐ Transportation and Public Utilities |
| ☐ Wholesale Trade | ☐ Construction |
| ☒ Services | ☐ Agriculture |
| ☐ Manufacturing | ☐ Mining |
| ☐ Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

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

4. The name and address to which future correspondence should be addressed:

Amy Thorne

4715 E. Comish

Idaho Falls, ID 83406

Phone number (optional):

208 542-6550

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

Signature: Amy Thorne

(signature required)

Printed Name: Amy Thorne

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

IDaho SECRETARY OF STATE
01/13/2003 05:00
CK: 1403 CT: 15010 BH: 656476
1 @ 20.00 = 20.00 ASSUM NAME # 2

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