

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name JAN -3 AM 9: 55

Please type or print legibly.

NOTE: See instructions on reverse before filing. SECRETARY OF STATE

(see instruction # 8 on back of form)

Technical Consulting Services	
The true name(s) and business address(es) of business under the assumed business name: Name Robert D. Pharmer	
3. The general type of business transacted unde	er the assumed business name is:
 Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Technical Consulting Services 2702 Greenwood Circle	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	200 334-2301
Boise, Idaho 83706 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-863-9624
Boise, Idaho 83706 5. Name and address for this acknowledgment	Phone number (optional):
Boise, Idaho 83706 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):