(see instruction # 8 on back of form)

FILED EFFECTIVE



## CERTIFICATE OF ASSUMED BUSINESS NAME

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

STATE OF IDAHO Please type or print legibly. NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: TC GAMES AND MORE 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 **TODD COUNTRY INC** 1820 E 1100 S EDEN, ID 83325 C167771 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$25.00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State 700 West Jefferson correspondence should be addressed: **Basement West** TODD COUNTRY INC PO Box 83720 Boise ID 83720-0080 1820 E 1100 S EDEN, ID 83325 208 334-2301 RENEE TODD Phone number (optional): Name and address for this acknowledgment CODY IS (if other than #4 above). Secretary of State use only <-- Don't forget to sign the form after you've printed it out! Signature: ms/abn for vised 04/200 (signature required) RENEE TODD Printed Name: IDAHO SECRETARY OF STATE PRESIDENT -- such as: owner, presided 5 ratifier 200 cK: 1145554 CT: 172099 BH: 1053432 1 @ 25.00 assum Name # 2 Capacity/Title: