

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name 8: 59

FILED EFFECTIVE

NOTE: See instructions on reverse before filing.	
1. The assumed business name which the undersign business is: ELECTRONIC	
2. The true name(s) and business address(es) of the business under the assumed business name: Name IACKIE LIEBERMAN 19189 BIRCH WOUD CALDWELL, 1 D F360	Complete Address
3. The general type of business transacted under the	
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
5. Name and address for this acknowledgment copy is (if other than # 4 above).	Phone number (optional): 508 941-1403
	Secretary of State use only
Signature: Acki Survival (signature required) Printed Name: TACKIE LI EBERMAN Capacity/Title: UNNER (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 10