

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned P 28 38 submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

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

STATE OF IDAHO"

OF STATE

The true name(s) and business address(es) of business under the assumed business name: Name TNT WORK CO LLC	the entity or individual(s) doing Complete Address PO BOX 740 Twin Falls, ID 83301
3. The general type of business transacted under	the assumed business name is:
Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301

Signature:

(signature required)

Printed Name: _

Brandon Jones

Capacity/Title:___

Director

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE
09/29/2009 05:00
CK: 1892 CT: 248939 BK: 1188895
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