CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

1	gives notice of adoption of an A	
1.	The assumed business name which the u business is: Tee Moser Interiors	STATE
2.	The true name(s) and business address(e business under the assumed business na Name Teemaree Moser	
3.	The general type of business transacted to (mark only those that apply) Retail Trade	ng Transportation and Public Utilities
4.	 Wholesale Trade	
	The name and address to which future	Phone number (optional):
	The name and address to which future correspondence should be addressed: Teemaree Moser - 25356 Karen Dr. Middleton, Id 83644	Submit Certificate of Assumed Business Name and \$20.00 fee to:
	correspondence should be addressed: Teemaree Moser-25356 Karen Dr.	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson
	correspondence should be addressed: Teemaree Moser-25356 Karen Dr. Middleton, Id 83644 Name and address for this acknowledgme	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

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(see instruction #8 on back of form)