

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. FILED EFFECTIVE 2006 JUN 26 AM 9: 56

Please type or print legibly. NOTE: See instructions on reverse before filing.

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The assumed business name which the undersigne business is:      TRIOS	ed use(s) in the transaction of
2. The true name(s) and business address(es) of the ebusiness under the assumed business name:  Name  Nikki Stophenson 417 5	Complete Address
3. The general type of business transacted under the a	
<ul> <li>Wholesale Trade</li></ul>	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  Nikki Strphenson  417 S. Meredian  Blackfoot, Id 83021	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):  US-785-7500
	Secretary of State use only
Signature: <u>Mikki Stephenson</u> Printed Name: <u>Mikki Stephenson</u> Capacity/Title: <u>Dwner</u>	016/265
Capacity/Title: <u>Dwner</u> (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  06/27/2006 05:00  CK: 226 CT: 261793 BH: 962133 1 9 25.00 = 25.00 ASSUM NAME # 2