

Signature:

Capacity:

Printed Name:

(see instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

-m cep 19 11 8:53

1. The assumed business name which the undersigned use(s) in the transaction of business is: Computer Gun of Idaho 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 890 E. Junnis 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade 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 correspondence should be addressed: 700 West Jefferson **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301 5. Name and address for this acknowledgment Phone number (optional): CODY IS (if other than # 4 above): Secretary of State use only

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IDAHO SECRETARY OF STATE

09/19/2003 05:00

CK: 2 CT: 158810 BH: 782578

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