



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.

2003 JUN 26 AM 8:21

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

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Accounting Solutions

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name
Vickey Maki

Complete Address
3834 Brookfield Lane
Ammon Id
83406

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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

4. The name and address to which future correspondence should be addressed:

Accounting Solutions
3834 Brookfield Lane
Ammon Id
83406

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

208-529-9734

Signature: Vickey Maki

(Signature required)

Printed Name: Vickey Maki

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

03/corporation forms/ln/p65
Revised 04/2003

IDAHO SECRETARY OF STATE
06/26/2003 05:00
CK: 6256 CT: 158018 BH: 608055
1 @ 25.00 = 25.00 ASSUM NAME # 2

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