227			
CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAH 97 JUN -9 AM 9: 20			
Pursuant to Section 53-504, Idaho Code, the undersolved gives notice of adoption of an Assumed Busines Alenge IDAHO			
1.	The assumed business name which the undersigned use(s) in the transaction of business is:		
	Tikkolas		
2.	 The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Nome Complete Address 		
	Name		Simplete Audicas
	Uicki McMillan	2777 NID	12th, Meridian, ID
	Jeff Tibala	Same	
3	 The general type of business transacted under the assumed business name is: (mark only those that apply) 		
	 ☐ Retail Trade ☐ Wholesale Trade ☐ Wholesale Trade ☐ Agriculture ☑ Services - βar ☐ Construction 	F	ransportation and Public Utilities inance, Insurance, and Real Estate lining
 The name and address to which future Phone number (optional): <u>365-3108</u> correspondence should be addressed: 			
	Uichi McMillan		Submit Certificate of
i I	2777 NW 12th		Assumed Business Name and \$20.00 fee to:
	Meridian, ID 83642		Secretary of State 700 West Jefferson
	 Name and address for this acknowledge 	nent	Basement West PO Box 83720
	COPY IS (if other than # 4 above):		PO Box 83720 Boise ID 83720-0080 208 334-2301
			Secretary of State use only
		2/97	LARSIN PROVIDES SP STOR
		Revision 2/87	IDAHO SECRETARY OF STATE DATE 06/09/1997
Sign	ature: Tick Mc Millan)		0900 100290 2 0K#:2 0JST# 82636
	ed Name: Uick: McMillan	a toorptforms/abn.pm6	ASSUN NAME 10 20.00= 20.0
Cap	acity: <u>Gressdent</u>	- itorms/	
	(see instruction # 8 on back of form)	g (carp	#: D5290

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