



# 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.

10 SEP -2 AM 8:20

Please type or print legibly.

Instructions are included on back of application.

SECRETARY OF STATE  
STATE OF IDAHO

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

LEAN SOLUTIONS CONSULTING

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

Name	Complete Address
<u>DT HANSEN ENTERPRISES LLC</u>	<u>3616 E. BAEVIAN DR NAMPA ID</u>
<u>W 24024</u>	<u>83686</u>

- 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  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

DT HANSEN ENTERPRISES, LLC  
3616 E. BAEVIAN DR  
NAMPA, ID 83686

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: Don Hansen

Printed Name: DON HANSEN

Capacity/Title: OWNER

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_

Secretary of State use only

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IDAHO SECRETARY OF STATE  
09/02/2010 05:00  
CK: 1494 CT: 250926 BH: 1237374  
1 @ 25.00 = 25.00 ASSUM NAME # 2