

CERTIFICATE OF

ASSUMED BUSINESS EXPRESTIVE
Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. Please type or print legibine 3 NOV 12 AM 8: 45

2003 NOV -5 AM 9: 00

(see instruction # 8 on back of form)

| NOTE: See instructions on reverse before fili | ng. |
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| | STATE OF IDAGE |
| The assumed business name which the undersign business is: | ined use(s) in the transaction of |
| AA-Answers and Al | lan Li |
| Terreswers and 111 | ternatives |
| 2. The true name(s) and <u>business</u> address(es) of the | e entity or individual(s) doing |
| business under the assumed business name: Name | Commission A. I. I. |
| | Complete Address |
| | 2425 S. Carroll Dr rley, ID 83876 |
| | 1169, 70 83816 |
| 3. The general type of business transacted under the | |
| The general type of business transacted under the | e assumed business name is: |
| Retail Trade Transportation and F | Public Utilities |
| | |
| Agriculture | Submit Certificate of |
| ☐ Manufacturing ☐ Mining☐ Finance, Insurance, and Real Estate | Assumed Business Name and \$25.00 fee to: |
| 4. The name and address to which future | |
| correspondence should be addressed: | Secretary of State 700 West Jefferson |
| Thomas R. Van Fosser | Basement West PO Box 83720 |
| 22425 3. Carrall Dr. | Boise ID 83720-0080 |
| Worley, ID 83876 | 208 334-2301 |
| 5. Name and address for this acknowledgment | Phone number (optional): |
| COpy is (if other than # 4 above): | (208)686-2706 |
| | |
| | SMOMMONEY e only |
| | ENCLOSED |
| Signature (signature required) Printed Name: 7/2 | |
| Printed Name: Thumas R. Van Fosser E. Van Fo | IDAHO SECRETARY OF STATE |
| Capacity/Title: Owser | 11/12/2003 05:00 CK: 3878 CT: 158010 BH: 711119 1 0 25.00 = 25.00 ASSIM NAME # 2 |
| (see instruction # 8 on back of form) | T E SO-886 = SO-886 ASSUM NAME # 2 |