



CERTIFICATE OF ASSUMED BUSINESS NAME

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.

MAY 15 AM 9:18
SECRETARY OF STATE
STATE OF IDAHO

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

Operators' Armor

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
<u>William R Carrell</u>	<u>1952 W Silver Falls Ct. Meridian ID 83642</u>
<u>Mari E. Carrell</u>	<u>*****</u>

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

- Retail Trade Transportation and Public Utilities
- Wholesale Trade Construction
- Services Agriculture
- Manufacturing Mining
- 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:

William Carrell
1952 W Silver Falls Ct.
Meridian ID 83642

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

Phone number (optional):

208-895-8118

Signature: William R Carrell
(signature required)

Printed Name: WILLIAM R CARRELL

Capacity/Title: OWNER
(see instruction # 8 on back of form)

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Revised 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE
 05/15/2003 05:00
 CK: 6003 CT: 150010 BH: 600766
 1 @ 25.00 = 25.00 ASSUM NAME # 2

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