## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

<u> </u>	To the SECRETARY OF STATE, STAT Pursuant to Section 53-504, Idal gives notice of adoption of an As	ho	Code, the	undersigned	
1.	The assumed business name which the unbusiness is:  ICM - Industria			STATE OF IDAHO  Consulting Management	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:				
	<u>Name</u> Co		Con	emplete Address	
	Steven House	6	144E 1	Den Flort Rd Kung ID	
3.	The general type of business transacted un (mark only those that apply)	nde	er the assur	ned business name is	
	Retail Trade	g		nsportation and Public Utilities ance, Insurance, and Real Estate ing	
4.	The name and address to which future Phone number (optional). 388-8768.				
	Boise, FO 83202			Submit Certificate of Assumed Business Name and \$20.00 fee to	
5.	Name and address for this acknowledgmen copy is (if other than # 4 above).	nt		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080	
	· Same"	_		208 334-2301	
		5		Secretary of State use only	
atu	ire: Stacs	Residence 188			

Sign

Printed Name: STEVEN Haase

Capacity: Owner

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

03/18/1999 09:00 CX: 1112 CT: 112758 N: 198294