

CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

97 MAY -9 AM 9:20

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

SECRETARY OF STATE
STATE OF IDAHO

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

Office Solutions

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Kathleen A. Wilson

Name

4533A Palm St., Mountain Home AFB
ID 83648

Address

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

Services

See categories on the reverse

4. The name and address to which correspondence should be addressed:

Kathleen A. Wilson

4533A Palm St., Mountain Home AFB ID 83648

Signed Kathleen A. Wilson

By

Capacity owner

Submit Certificate of Assumed
Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE
DATE 05/09/1997
0900 91130 2
CK #: 558 CUST# 81144
ASSUM NAME 1@ 20.00= 20.00

#: D 4299

Revision 10/96
g:\corpforms\stbn.pms