CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) Jun 17 10 ca AM 197 To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Range STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is: ADT FWANCIAL SERVICES CO. 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name Thomas W Sawer Mor Mencen Bois E 20 83703 The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate ✓ Services Construction Mining 4. The name and address to which future Phone number (optional): _ correspondence should be addressed: ADT FINANCIALS GENVILLES GO Submit Certificate of Po Box 25 MeanDay ID Assumed Business Name and \$20.00 fee to: 83860-0025 Secretary of State 700 West Jefferson Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301

Secretary of State use only

IDANO SECRETARY OF STATE
DATE 06/17/1997
0900 103080 2
CX #: CRSH CUST# 83080
ASSUM NAME 18 20,00= 20.00

#. n 5560

Signature:

Printed Name: Thank (V SAW 1/4 R

Capacity: aux ex

(see instruction # 8 on back of form)