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

	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 undersigned use(s) in the transaction of business is:		
	Aero-Save		
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	Name	<u>Cor</u>	nplete Address 882
	Air Wolf, Inc		ID 83638
3.	The general type of business transacted ur (mark only those that apply)	nder the assu	med business name is:
	Retail Trade	_	nsportation and Public Utilities ance, Insurance, and Real Estate ing
4.	The name and address to which future correspondence should be addressed: Air Wolf, Inc.	hone number	(optional) (208) 634-5749
	PO Box 882 McCall, ID 83638		Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgmer copy is (if other than # 4 above):	nt :	Secretary of State 700 West Jefferson Basement West / PO Box 83720 Boise ID 83720-0080 208 334-2301
		8	Ø206@\$√@\$@ Js @ 9½@@ CX: 193 CT: 127415 BH: 294223
Cianat	ro: Malares & P. (1708)	Revision 1/98	1 8 28.86 = 28.88 ASSUM NAME # 2
Signature: // Muguet W. W. W. W. 33568			
Printed Name: Margaret A. Wolf Capacity: Vice President/Secretary			
Capacity: Vice President/Secretary			

(see instruction # 8 on back of form)