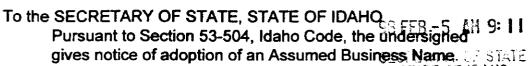
CERTIFICATE OF ASSUMED BUSINESS (Please type or print legibly. See instructions on reverse.)





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

	QUALITY HEAT:	ING AND	AIR	CONDITIONING	
--	---------------	---------	-----	--------------	--

	QUALITY HEATING AND AIR CONDIT	LITY HEATING AND AIR CONDITIONING						
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>		Cor	mplete Address				
QŢ	73 7 7 M 77 77 77 78 78 78 78 78 78 78 78 78 78		P.O. Box 127, Grangeville, ID					
	(High	way 95	North)	83530			
3.	The general type of business transacted ur (mark only those that apply)	nder ti	ne assu	med business nan	ne is:			
	Retail Trade	9 [Fin	insportation and P ance, Insurance, a ning				
4.	The name and address to which future Phone number (optional): 208-983-2495 correspondence should be addressed:							
	P.O. Box 127			Submit Certificate	of			
	Grangeville, ID 83530			Assumed Busines Name and \$20.00	s .			
5.	Name and address for this acknowledgmen copy is (if other than # 4 above):	nt		Secretary of State 700 West Jefferso Basement West PO Box 83720 Boise ID 83720-00 208 334-2301	on			
	QUALITY H.V.A.C., INC.	787		Secretary of State us				

By:
Signature: 4

Attest:

(see instruction # 8 on back of form)

02/05/1998 09:00 CK: 1711 CT: 3526 EH: 79551

1 9 20.00 = 20.00 ASSUM MAME

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