

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2005 111 15 11 2:50

Please type or print legibly. NOTE: See instructions on reverse before filing.

2. The true name(s) and business address under the assumed business	ress(es) of the entity or individual(s) doing ss name: Complete Address
KEITH CRESS	11670 E. CRESS ROAD
	ST.MARIES, IDAHO 83861
	ted under the assumed business name is: rtation and Public Utilities
XXX Services	ure Submit Certificate of Assumed Business
 The name and address to which future correspondence should be addressed: 	Socratary of Other
KEITH CRESS 11670 E. CRESS ROAD ST.MARIES, IDAHO 83861	PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowled copy is (if other than # 4 above). 	Igment Phone number (optional): 208,689,3733
	Secretary of State use only
Signature: Rotth (signature required)	IDAHO SECRETARY OF STATE 97/15/2005 05:00 CK: 513512215 CT: 158818 PN: 82138
Printed Name: KEITH L. CRESS	TIMAN CECESTARY OF CLUTE
Capacity/Title: OWNER (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 97/15/2005 05:00 CK: 513512215 CT: 150010 BH: 82139

CK: 513512215 CT: 150010 BH: 621393 1 0 25.00 = 25.00 ASSUM WAME # 2

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