



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Secretary of State
Business Entities
www.sos.idaho.gov

FILED EFFECTIVE

2005 JUN 14

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Aqua Mobile Dock WORKS

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

Name

Complete Address

Roger D. Jones

PO BX 15- Plummer, ID 83851

Renee B. Jones

PO BX 15- Plummer, ID 83851

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input checked="" type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Renee B. Jones
PO BX 15
Plummer ID 83851

Phone number (optional):

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Secretary of State use only

Signature: Renee B. Jones
(signature required)

Printed Name: Renee B. Jones

Capacity/Title: OWNER

(see instruction # 8 on back of form)

corpforms.idaho.gov
Revised 04/2003

IDAHO SECRETARY OF STATE
06/06/2005 05:00
CK: 1940 CT: 150010 BH: 814236
1 B 25.00 = 25.00 ASSUM NAME # 2

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