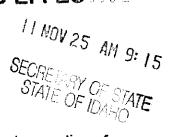


## CERTIFICATE OF **ASSUMED BUSINESS NAME**

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

Please type or print legibly. Instructions are included on back of application.





	Pumps and Water Systems			
bus	The true name(s) and <u>business</u> address(est business under the assumed business name <u>Name</u> <u>Matt Kehoe</u>			
3. The	e general type of business transacted u  Retail Trade	n and Put		
COr Ma Box	Finance, Insurance, and Real Estate e name and address to which future respondence should be addressed: tt Kehoe x 432 pe, ID 8836	•	Name and \$25.00 fee to:  Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
	me and address for this acknowledgme by is (if other than # 4 above).	nt		
			Secretary of State use only	
Signature				
	lame: Matt Kehoe			
	apacity/Title: Manager		IDAHO SECRETARY OF STATE	
	signature: / Company		11/25/2011 05:00 CK: 1556 CT: 201089 BH: 1299368	
Printed N			1 0 25.00 = 25.00 ASSUM NAME # 2	
Capacity/	Title:	Ì		

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