

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

FILED/EFFECTIVE

05/10 AM 8:45



Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

SECRETARY OF STATE

STATE OF IDAHO

1. The assumed business name which the undersigned uses in the transaction of business is:

ACE BOILER, HEATING & 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:

Name

Complete Address

MICHAEL L. MENCKE

505 W 20th St, Idaho Falls, ID 83402

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

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

ACE BOILER, HEATING & AIR CONDITIONING

505 WEST 20TH STREET

IDAHO FALLS, ID 83402

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

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0030
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

05/10/2001 09:00
CK: 6239 CT: 146179 BH: 396264

1 @ 20.00 = 20.00 ASSUM NAME # 2

Signature:

Printed Name: MICHAEL L. MENCKE

Capacity: OWNER

(see instruction # 8 on back of form)

Revision 2/97

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