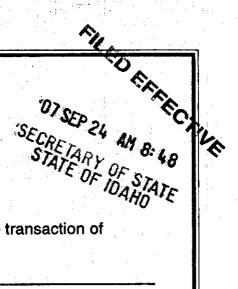


S

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. NOTE: See instructions on reverse before filing.



business is:	
Equity Financial S	envices
The true name(s) and <u>business</u> address(es) of the	ontity or individual(e) doing
business under the assumed business name:	entity of individual(s) doing
Name	Complete Address
	52 West Jester Way
4/106	Post Falls Idal.
<u>8</u> J.	859
The general type of business transacted under the	assumed business name is:
Transportation and Du	ablia I Hilitias
Retail Trade Transportation and Pu	
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
	PO Box 83720
Equity tinancial services	Boise ID 83720-0080
2252 W. Jester Way, #/106	208 334-2301
POST Falls IN 83854	
Name and address for this polynoidadament	Phone number (optional):
Name and address for this acknowledgment	
COPY IS (if other than # 4 above):	208-699-5969
	Secretary of State use only
atura:	
ature: (Signature required)	IDAHO SECRETARY OF STATE
ed Name: Green de Nam	09/24/2007 05:0
2	1 8 25.00 = 25.00 ASSUN NAME
icity/Title:	N11-252
(see instruction # 8 on back of form)	₩ 511.200C