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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed E Please type or print legibly.	NAME	FILED EFFEC	
NOTE: See instructions on reverse before filing.		SECRETARY OF STATE STATE OF IDAHO	
1. The assumed business name which the und business is: <u>RANDOM SERVICES</u>	dersigned use(s)	in the transaction of	
2. The true name(s) and business address(es business under the assumed business nam Name <u>CHRISTOPHER W. CORBIN JR.</u>	ie: Comp	individual(s) doing blete Address Poleline AVe	
	POST FALLS, 10 \$3854		
 3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: <u>RANDOM SERVICES</u> <u>3600 E. POLELINE AVE.</u> <u>POST FALLS</u>, ID <u>83054</u> 5. Name and address for this acknowledgme copy is (if other than #4 above): 	and Public Utilit Sub Asso Nam Idah 450 I PO E Boise (208)		
Signature: (signature required) Printed Name: <u>CHRISTOPHER CORBIN OR.</u> Capacity/Title: <u>OWNER</u> (see instruction # 8 on back of form)	g: contributmetation tormstaatinp55 Rewised 04(2003	Secretary of State use only IDAHO SECRETAR 12/21/200 CK: 1261 CT: 24315 1 e 25.00 = .25.00	Y OF STATE 9 605 # 600 3 BH: 1199946 Assum Mane #

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