

CERTIFICATE OF ASSUMED BUSINESS NAME

CERTIFICATE OF ASSUMED BUSINESS N Pursuant to Section 53-504, Idaho Code, the u submits for filing a certificate of Assumed Busin Please type or print legibly. NOTE: See instructions on reverse before file	ndersigned STATE OF IDA STATE
The assumed business name which the undersigned use(s) in the transaction of business is: WET TECH SPRINKLER REPAIR	
The true name(s) and business address(es) of business under the assumed business name:	f the entity or individual(s) doing Complete Address 1890 S HERVEY ST BOISE, ID 83705
3. The general type of business transacted under Retail Trade Transportation are Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: KEGAN AMUNDSON 1890 S HERVEY STREET BOISE, ID 83705	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above): SAME AS ABOVE	Phone number (optional): 208-890-5970
CAMIL AG AGGVE	Secretary of State use only

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IDAHO SECRETARY OF STATE

04/19/2004 05:00 CK: 1427 CT: 158818 BH: 748833 1 8 25.88 = 25.88 ASSUM NAME # 2

Capacity/Title: (see instruction # 8 on back of form)

(signatura (navequired) KEGAN AMUNDSON

OWNER/PROPRIETOR

Signature: 1/2

Printed Name