CERTIFICATE OF ASSUMED BUSINESS NAME



(Please type of print leg	JIDIY)
To the SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Cogives notice of adoption of an Assume	ode, the undersigned ed Business Name.
 The assumed business name which the abusiness is: Joe's Mobile Installat. 	202
2. The true name(s) and business address(business under the assumed business name Name Edmond L Ramar Patricia A Ramar	(es) of the entity or individual(s) doing on the ame is/are: Complete Address 9311 W Moose Rd 9311 W. Moose Rd
3. The general type of business transacted (mark only those that apply) X Retail Trade Manufactur Wholesale Trade Agriculture Services Construction	ring Transportation and Public Utilities Finance, Insurance, and Real Estate
 4. The name and address to which future correspondence should be addressed: Po. Box 693 Pocatello Ida 83204 Joe's Mobile Installation 5. Name and address for this acknowledgm 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 83720-0080 208 334-2301
	Secretary of State use only IDAHO SECRETARY OF STATE 11/29/1999 09:00 CK: 4559 CT: 123457 BH: 269353

Signature: Edmond & Rhu

Printed Name: Edmond L. Rumet

Capacity: OWner

(see instruction # 8 on back of form)

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 31133