

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECT:

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2005 JAN 19 1 199

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Schreiber Executive Services  2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:			
		Name	Complete Address
		Executive Fiduciary Services, Inc	11680 Chinden Blvd
C158/55	Boise, Idaho 83714		
3. The general type of business transacted ur  Retail Trade Transportation Wholesale Trade Construction	nder the assumed business name is:		
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Stan Porter PO Box 1208 Eagle, Id 83616	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301		
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent Phone number (optional): 208-939-4337		
	Secretary of State use only		
nature:	IDAHO SECRETARY OF STATE OF ST		
Oacity/Title: President (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  91/12/2005 05 =  CK: 3738 CT: 158010 BH: 78  1 8 25.00 = 25.00 ASSUM NA		