(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 00 JAM -5 AVII: 35

Please type or print legibly. NOTE: See instructions on reverse before filing. SECFL STATE STATE OF IDAHO

The assumed business name which the undersigned use(s) in the transaction of business is: Machanical	
2. The true name(s) and <u>business</u> address(es) of the end business under the assumed business name: Name Christopher L. Rosecrans 1328 According 1328 Acc	Complete Address V. Flamingo CT Nampa Id 1. Flamingo CT Nampa Id 83651-2037
Retail Trade	
5. Name and address for this acknowledgment copy is (if other than # 4 above).	Phone number (optional): 208-284-0084
	Secretary of State use only
Signature: Chish Stock Crans (signature required) Printed Name: Capacity/Title: Cover Crans	IDAHO SECRETARY OF STATE 01/05/200 5 05:00 CK: NO CK # CT: 158010 BH: 785338 1 0 25.00 = 25.00 ASSUM NAME # 2

D 83107