(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. 2006 MAY -5 PM 12: 53 SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

	J~Shaydz
2. The true name(s) and business address business under the assumed business r Name Gotecy Inc.	c(es) of the entity or individual(s) doing name: Complete Address 3456 E. 17TH St. Suite 185 Idaho Falls, ID 83406
	tion and Public Utilities
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: J.W. Jones 3456 E. 17Th St. Suite 185 Idaho Falls, ID 83406	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledge copy is (if other than # 4 above). 	ment Phone number (optional): (208)569-1378
	Secretary of State use only
gnature: J.W. Jones President	- Under Secretary of State - Under Secretary of

D 99568