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CERTIFICATE OF ASSUMED BUSINESS I Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bus Please type or print legibly. NOTE: See instructions on reverse before	undersigned siness Name. STATE OF IDAHO
1. The assumed business name which the under business is: A + SYSTEM 5	ersigned use(s) in the transaction of
2. The true name(s) and business address(es) of business under the assumed business name: Name BRGWN DAVID 5	
3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: SAMC A 5 A 2', $575 C B_{0}G_{1}C DR$ ROMC A 5 A 2', $575 C B_{0}G_{1}C DR$	er the assumed business name is: Ind Public Utilities 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
<u>7657</u> FALLS ID 83854 5. Name and address for this acknowledgment copy is (if other than #4 above): <u>5AME A5 #4</u>	
Signature: Printed Name: DAVID J, BROWN Capacity/Title: OWNER (see instruction # 8 on back of form)	Sod upproved Sod upproved Sod upproved Sod upproved Sod upproved Sod upproved Sol upproved So