

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. 29ng SEP 15 All 9: 32

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

(see instruction #8 on back of form)

NOTE: See instructions on reverse before	filling.
 The assumed business name which the under business is: 	ersigned use(s) in the transaction of
AMERICAN VAN GO PAINTING	
The true name(s) and business address(es) of business under the assumed business name Name MARK A McCLAIN	of the entity or individual(s) doing : Complete Address PO BOX 42, OSBURN, ID 83849
Wholesale Trade Construction	er the assumed business name is: and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: MARK A McCLAIN PO BOX 42 OSBURN, ID 83849	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than #4 above): INTEGRITY COUNTS BOOKKEEPING 	Phone number (optional):
PO BOX 402 PINEHURST, ID 83850	Secretary of State use only
Signature: Mark w= Clain (signature required) Printed Name: MARK McCLAIN	IDAHO SECRETARY OF STATE State
Capacity/Title: OWNER	IDAHO SECRETARY OF STATE 99/15/2003 05:00 6 CK: 843317316 CT: 158010 BH: 781658
(see instruction # 8 on bank of form)	8 1 0 25.00 = 25.00 ASSUM NAME # 2

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