



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Secretary of State
Business Entities
www.idsos.state.id.us/

2007 JAN -8 AM 8:48

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Structural Solutions

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

David Wayne Alejandro
CHANCE H.R. AN YEE

6215 E Commerce LP Post Falls ID 83854
6215 E COMMERCE LOOP, POST FALLS, ID, 83854

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input checked="" type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

4. The name and address to which future correspondence should be addressed:

Structural Solutions
6215 E Commerce LP C
Post Falls ID 83854

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

1509-951-2543

Secretary of State use only

Signature:

David Alejandro
(signature required)

Printed Name:

David Alejandro

Capacity/Title:

Partner

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE
01/08/2007 05:00
CK: 3236 CT: 67690 BH: 1024383
1 25.00 = 25.00 ASSUM NAME # 2

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