

Capacity/Title:_

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly. Instructions are included on back of application. 1277-5 01 9 09

The assumed business name which the undersigne business is: Electric Solutions	
2. The true name(s) and <u>business</u> address(es) of the elements business under the assumed business name: Name Rick James Chapman 200	Complete Address
3. The general type of business transacted under the a Retail Trade Transportation and Pull Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: Rick Chapman 2007 W. Chadfald Nama, IO 8365/	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature: Rick Chapman Printed Name: Rick Chapman	Secretary of State use only
Capacity/Title: Owned	·
Signature:	IDAHO SECRETARY OF STATE 94/05/2012 05:00
Printed Name:	CK: 283876636876 CT: 158818 BH: 1318434

D 154616