CERTIFICATE OF	FILED EFFECTIVE
ASSUMED BUSINESS	SNAME STREET
Pursuant to Section 53-504, Idaho Code, t submits for filing a certificate of Assumed I	the undersigned
Please type or print legibly	Business Name.
NOTE: See instructions on reverse befo	For the filling. D_{AL}
1. The assumed business name which the un business is:	FILED EFFECTIVE S NAME the undersigned Business Name. bre filing. bre filing. bre signed use(s) in the transaction of
AGUA BLUE I	POOL SERVICE
2. The true name(s) and business address(es business under the assumed business nam Name EFRAIN M. RUIZ	s) of the entity or individual(s) doing ne: Complete Address 7718 W. RYGATE DR. BOISE, ID 83714
 The general type of business transacted un 	der the accumed husiness
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 7718 W. RYGATE DR. BOISE, ID 83714	and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
 Name and address for this acknowledgmer copy is (if other than #4 above): SAME# 	nt
	Secretary of State use only
ted Name: EFRAIN M. RUIZ	IDAHO SECRETARY OF STATE Ø2/11/2008 Ø5=00 CX: 613 CT: 167525 BH: 1899101 IDAHO \$5.88 = 5.86 \$5.80