



# 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

26/09/2006 SEP 11 AM 11:28

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:

Cutting Edge Properties

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Innovative Commercial Services LLC

W 18996

Complete Address

1411 Falls Avenue East

Suite 215

Twin Falls Idaho 83301

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 type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input checked="" type="checkbox"/> Finance, Insurance, and Real Estate	

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

1411 Falls Avenue East

Suite 215

Twin Falls Idaho 83301

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

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

Phone number (optional):

Signature:

(Signature required)

Jeffrey D Whittemore

Printed Name:

Owner

Capacity/Title:

(see instruction # 8 on back of form)

Information Form  
Rev 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE  
09/12/2006 05:00  
CK: 3981 CT: 204301 BH: 974582  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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