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## **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.

Aug 17 2 13 PM '01

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

SECRETAR OF STATE

	STATE OF JAMO
The assumed business name which the under	ersigned use(s) in the transaction of
business is:  ADVANCED SECURITY CON	m tenctors
<ol> <li>The true name(s) and <u>business</u> address(es) of business under the assumed business name:</li> </ol>	of the entity or individual(s) doing
<u>Name</u>	Complete Address
DAUID Lee Bullen 20 GINNIG ETIZABETA Bullen 20	1358E. Locust of FMMe#FD83617
Ginny Elizabeth Bullen 20	1358 E. Locust St EmmetTD 83617
3. The general type of business transacted under	der the assumed business name is:
Retail Trade Transportation a Wholesale Trade Construction	and Public Utilities
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business Name and <b>\$20.00</b> fee to:
Finance, Insurance, and Real Estate	
<ol><li>The name and address to which future correspondence should be addressed:</li></ol>	Secretary of State 700 West Jefferson
DAVID Lee Bellen	Basement West PO Box 83720
BASS E. LOQUET ST	Boise ID 83720-0080
EMMett 50 83617	208 334-2301
Name and address for this acknowledgment	nt Phone number (optional):
COPY is (if other than # 4 above).	208365-2156
	2086024665
	Secretary of State use only
	IDAHO SECRETARY OF STATE    1000
Signature: <u>kullackalla</u>	IDAHO SECRETARY OF STATE
Printed Name: NAUID Lee Bullen	IDAHO SECRETARY OF STATE  100 000 000 000 000 000 000 000 000 00
Capacity: <u>Owner</u>	1 + CO. 00 - CO. 00 NOOM NAME & C.
(see instruction # 8 on back of form)	D -17 (alog)