

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.

07 SEP -4 AM 8: 30 SECRETARY OF STATE STATE OF IDAHO

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

 The assumed business name which the under business is: 	ersigned use(s) in the transaction of
Central Vacuum	Systems
2. The true name(s) and business address(es) business under the assumed business name Name Grant Loveless Julie Loveless	of the entity or individual(s) doing
3. The general type of business transacted und	er the assumed business name is:
Retail Trade Transportation a Wholesale Trade Construction	and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Grant Loveless 305 Church Ave Buhl, JD 83316	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above). 	Phone number (optional): (208) 543-6502
	Secretary of State use only
Signature: Hant le Jacobs (signature required)	D 130
Printed Name: Grant Loveless	IDAHO SECRETARY OF STATE IDAHO SECRETARY OF STATE 100 A 10
Capacity/Title: OWKR	CK: 4578 CT: 158818 BH: 1873718 1 8 25.88 = 25.88 ASSUM NAME # 2