CERTIFICATE OF ASSUMED BUSINESS NAME

ac		ode, the undersigned we notice of 197
1.	Ioption of an Assumed Business Name. The assumed business name which the ubusiness is: Shaw when Associates	SECRETACY OF STATE
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	Shaw, Robert R.	3174 Esquire Dr. #201
	Shaw, Robert R. Shaw, Regima G.	3174 Esquire Dr. #201
3.	The general type of business transacted under the assumed business name is:	
	Phoperary Management See categories on the reverse	,
4.	The name and address to which correspondence should be addressed: 3174 Esquire Dr. #201 Brist, Idalia 83784	
	Signed 5	Robert R. Shaw
	Ву	
	By _ Capacity	
	•	
	Capacity Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer# Secretary of State use only
	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson	Customer# Secretary of State use only
	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State	Customer # Secretary of State use only