CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name ARY OF STATE	
1. The assumed business name which the undersigned use(s) in the transaction of business is: EACCE Security Consultants	
2. The true name(s) and business address(es business under the assumed business name Name 5	, , , , , , , , , , , , , , , , , , , ,
3. The general type of business transacted under the assumed business name is: (mark only those that apply) ☐ Retail Trade ☐ Manufacturing ☐ Transportation and Public Utilities ☐ Wholesale Trade ☐ Agriculture ☐ Finance, Insurance, and Real Estate ☐ Services ☐ Construction ☐ Mining	
The name and address to which future P correspondence should be addressed:	208/939-07/9 U04C& Phone number (optional): 208/939-13/1 FAX
EAGLE SECURITY CONSULTANTS 5035 WILLOW CREEK RI) BAGLE, ID 83Cel6-2011	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	700 West Jefferson
	Secretary of State use only
Signature: (Seut Hules)	IDAHO SECRETARY OF STATE 12/01/1999 09:00
Printed Name: ROBERT H. West	CK: none CT: 123583 BH: 278218 2 1 0 20.00 = 20.00 ASSUM NAME # 2
Capacity: PRESIDEN (see instruction # 8 on back of form)	D3:11+0