FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filling a certificate of Assumed Business Name. 2008 MAR 26 PH 3: 45

SECRETARY OF STATE STATE OF IDAHO

 The assumed business name which the business is: 	undersigned use(s) in the transaction of
E. 8	C. ELECTRIC
The true name(s) and business address business under the assumed business r Name ERIC R CHESLIK	s(es) of the entity or individual(s) doing name: Complete Address 519 LINCOLN ST., TWIN FALLS, ID 83301
3. The general type of business transacted Retail Trade Transportar Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta 4. The name and address to which future correspondence should be addressed: ERIC R CHESLIK 519 LINCOLN ST. TWIN FALLS, ID 83301	tion and Public Utilities on Submit Certificate of Assumed Business
5. Name and address for this acknowledge copy is (if other than #4 above):	_
	Secretary of State use only
nted Name:	IDAHO SECRETARY OF STATE

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