

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

D1021369

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

05 OCT -3 AM 9: 06

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

(see instruction # 8 on back of form)

SELECTION

	STATE CARDAHO
1. The assumed business name which the ur	
business is:	At INStall
2. The true name(s) and <u>business</u> address(est business under the assumed business name Name Rev. Waters	
3. The general type of business transacted un	
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: 7/1 4/4 40 N 7/20 NOMPA, ID \$3677	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgme copy is (if other than # 4 above): 	ent Phone number (optional):
	Secretary of State use only
Signaturer Signaturer Signature required Printed Name: Su Waters Capacity/Title: OWIVer	IDAHO SECRETARY OF STATE 10/03/2006 05:00 CK: CASH CT: 158010 BH: 978323 1 2 25.00 = 25.00 ASSUM NAME # 2