

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE 11 APR -6 AM 11:56

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

The assumed business name which the und business is:	dersigned use(s) in the transaction of
Pulse Distribution	
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name Robert T Guerrers Je	
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining	and Public Utilities Submit Certificate of
Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Dobert Guerrero 2538 N. Coach vood Dr.	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	it
11/10/0	Secretary of State use only
Signature: The Control Name: 7 ()	
Printed Name: Robert F Guerrero J- Capacity/Title: owner	
Signature:	IDAHO SECRETARY OF STATE
Printed Name:	CK: 3866 CT: 257464 PM: 12/7040
Capacity/Title:	1 8 25.80 = 25.86 ASSUM NAME # 2
abn.pmd Rev. 07/2	D 14664