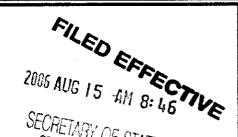


## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.



1. The assumed business name which the undersigned use(s) in the transaction of business is: ACE VENDING OF BOISE 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: **Complete Address** Name AARON ENWARDS 1042 N CLIFF CREEK 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services Agriculture Submit Certificate of **Assumed Business** Mining Manufacturing Name and \$25.00 fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: Basement West PO Box 83720 1047 N. CUFF CREEK Boise ID 83720-0080 208 334-2301 Phone number (optional): 5. Name and address for this acknowledgment CODY IS (if other than # 4 above). 208-433-9712

Signature: Mun (quin (Goneture required)

Printed Name: <u>AARON EDWARDS</u>

Capacity/Title: OWNER OPERATOR

(see instruction #8 on back of form)

w/mad 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE

08/15/2006 05:00

CX: 239 CT: 203432 BH: 970112

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