



CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 2006 SEP 15 AM 9:24
submits for filing a certificate of Assumed Business Name.

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

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

AQUARIUS DESIGN

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
<u>CYNTHIA A. SMITH</u>	<u>281163 SILD WAY</u>
<u>COLE R. SMITH</u>	<u>WILDER ID 83676</u>
	<u>208-482-9918</u>

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

CYNTHIA A. SMITH
281163 SILD WAY
WILDER ID 83676

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

Signature: _____

(signature required)

Printed Name: CYNTHIA A. SMITH

Capacity/Title: OWNER / PARTNER

(see instruction # 8 on back of form)

Secretary of State use only

g:\corporate\information\p05
Revised 04/2003

IDAHO SECRETARY OF STATE
09/15/2006 05:00
CK: 517 CT: 158810 BH: 975259
1 @ 25.00 = 25.00 ASSUM NAME # 2

D103746