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(see instruction # 8 on back of form)



CERTIFICATE OF

ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned DIE AH 9: 18 submits for filling a certificate of Assumed Business Name.

02 APR 11 AH 9: 18

STATE OF IDAHO

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:			
	Unity, Inc.			
2.	The true name(s) and <u>business</u> address(es) business under the assumed business name:	dress(es) of the entity or individual(s) doing ness name:		
	<u>Name</u>		Complete Address	
	Porto UNIÃO INC	701	Renner Rd	
	(C-143072)	Wil	mingden SE 19810	
3.	The general type of business transacted under the assumed business name is:			
	Retail Trade Transportation Wholesale Trade Construction	and Pu	blic Utilities	
	Services		Submit Certificate of Assumed Business	
	Finance, Insurance, and Real Estate		Name and \$20.00 fee to:	
4.	The name and address to which future correspondence should be addressed:		Secretary of State 700 West Jefferson	
	Months Inc		Basement West PO Box 83720	
	2900 N. GOVERNMENT WAY # 113		Boise ID 83720-0080	
	Cocur d'Alene ID 83815-8751		208 334-2301	
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	t	Phone number (optional):	
			Secretary of State use only	
	18/11/1/-	abn. p65	P53842	
ignature:				
rinte	d Name: Wilhelm	orp Vorms labn, p65 Revised 12/2001	IDAHO SECRETARY OF STATE 94/11/2002 05:00 CK: 1518 CT: 158588 BH: 458498	
apac	sity/Title: Pasidon T	orp\fo	1 8 20.00 = 20.00 ASSUM NAME # 2	