FILED EFFECTIVE



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.

08 DEC -4 PM 3: 39

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the unders business is: FSD INC.	
2. The true name(s) and business address(es) of business under the assumed business name: Name FIRE SECURITY DISTRIBUTING INC.	the entity or individual(s) doing Complete Address 3269 MAZE AVE BOISE IDAHO 83706
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: FIRE SECURITY DISTRIBUTING INC. 3269 MAZE AVE BOISE IDAHO 83706 5. Name and address for this acknowledgment copy is (if other than # 4 above): FIRE SECURITY DISTRIBUTING INC.	
anature: (signature required) KEITH OLSTROM pacity/Title: (see instruction # 8 on back of form)	Secretary of State use only IDANO SECRETARY OF STATE 12/04/2008 05:00 CK: 176665 CT: 172899 BH: 1146 1 8 25.00 = 25.00 ASSUM NAME