

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED/ENTECTIVE

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.

(see instruction # 8 on back of form)

STATE OF IDAHO

The assumed business name which the undersigned business is:      Wire Managen	d use(s) in the transaction of
The true name(s) and <u>business</u> address(es) of the e business under the assumed business name:  Name	entity or individual(s) doing  Complete Address  Tahoe Bolse 83709
3. The general type of business transacted under the a Retail Trade Transportation and Put Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Clay Almonds  Clay Almonds  5. Name and address for this acknowledgment	
Signature: Clay ton H. Almauist I	Secretary of State use only  IDANO SECRETARY OF STATE
Printed Name Clay ton H. Alm Q U 15 T T Sold of State of the Connective Title: Connective to the Conne	03/06/2003 05:00 CK: 6485 CT: 158019 BH: 666819 1 0 20.00 = 20.00 ASSUM NAME # 2