

CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 MAY 28 AM 8: 13

Please type or print legibly. NOTE: See instructions on reverse before filing.	SECRETARY OF STAT STATE OF IDAHO
The assumed business name which the undersigned use(s) is business is: Drain Doctor	n the transaction of
2. The true name(s) and business address(es) of the entity or in business under the assumed business name: Name Complete Marc Frederick French Michelle Elizabeth French Fruitland.	ete Address
3. The general type of business transacted under the assumed Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture	
Manufacturing Mining Assur Finance, Insurance, and Real Estate 4. The name and address to which future	med Business e and \$25.00 fee to: Secretary of State 4th Street
Marc & Michelle French PO Bo Boise	x 83720 ID 83720-0080 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Man Mide at 1	Secretary of State use only
nature: Much repulse Alle Marc French pacity/Title: Dwnh1	TROUG SECRETARY OF STATE
(see instruction # 8 on back of form)	05/28/2008 05:06 CK: 395 CT: 226498 3H: 111782 1 9 25.06 = 25.08 ASSUM MAME