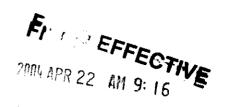


CERTIFICATE OF ASSUMED BUSINESS NAME

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.

 The assumed business name which the ι business is: 	undersigned use(s) in the transaction of
Priest Lake Pro	perty Maintenance
2. The true name(s) and business address(obusiness under the assumed business name Name Michael A. Belles	es) of the entity or individual(s) doing
3. The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction	on and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Mike Belles 4777 W. Lakeshore Rd. Priest Lake 10. 83856	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgm copy is (if other than # 4 above): 	Phone number (optional): 208 943-12.16
	Secretary of State use only
Signature: (signature reduired) Printed Name: Michael A. Belles Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 94/22/2004 05 = 00 CX: 2971 CT: 158910 BH: 748768 1 9 25.88 = 25.80 ASSUM NAME # 2