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## CERTIFICATE OF ASSUMED BUSINESS NAME

Tc	To the SECRETARY OF STATE, STATE OF	FIDAHO  ode, the undersigned gives notice of STATE
ad	adoption of an Assumed Business Name.	rde, the undersigned gives notice of STATE.
1.	. The assumed business name which the υ business is:	undersigned use(s) in the transaction of
	MIRAGE SECURI	TY SERVICE
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	<u>Name</u>	Address
	RICKIE D. OLIVER	201 BALD MT. ROAD KETCHUM IN 83340
		P.O. BOX 3292 KETCHUM ID. 83340
3.	The general type of business transacted under the assumed business name is:	
	SERVICES	
	See categories on the reverse	
	_	
4.	. The name and address to which correspo	indence should be addressed:
	MIRAGE SECURITY SERVICE	P.O. BOX 3292 KETCHUM IA. 83340
	Signed _	Ful . D. Ol
		Pul. D. DLINER

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080 Customer#

Secretary of State use only

IDAHO SECRETARY OF STATE
DATE 03/04/1997

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