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CERTIFICATE		
ASSUMED BUSINE		FEC
Pursuant to Section 53-504, Idaho Co submits for filing a certificate of Assur	ode, the undersigned med Business Name.	00 PH 25 30
Please type or print legit NOTE: See instructions on reverse	<u>bly.</u> before filing.	STATE LE IDANO
 The assumed business name which th business is: 		
Sounds + Sec.	urity of	Idaho Falls
 The true name(s) and <u>business</u> addres business under the assumed business r 	s(es) of the entity o	
Name	Cor	nplete Address
Ripu S. Smith	- 484 Hick	ary Circle
	clabo to	11s, IN 83404
 Wholesale Trade Construct Services Agricultur Manufacturing Mining Finance, Insurance, and Real Es The name and address to which future correspondence should be addressed: Agan S Smith Had Hickory Circle 	re Su As Na Na Na Na Na 70 Ba PC Bo	lities Ibmit Certificate of sumed Business Ime and \$20.00 fee to: Incretary of State 0 West Jefferson sement West 0 Box 83720 ise ID 83720-0080 8 334-2301
5. Name and address for this acknowled	Pho	
COPY IS (if other than # 4 above):	-	ne number (optional): 04 - 390 - 294 <i>8</i>
	<u> </u>	01 010 4118
		Secretary of State use only
Printed Name: <u>Ryan</u> Smith Capacity: <u>Owner</u> (see instruction #8 on back of form)	g:/corptforms/abn.p65 Raviaed 01/2001	IDAHO SECRETARY OF STATE 10/31/2001 05: CK: 3044 CT: 153043 BH: 42 1 @ 20.00 = 20.00 ASSUM MA
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