



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2005 NOV 16 AM 9:31

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

AEDMIN

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
<u>Paula R. Mangini</u>	<u>312 Meadows Lane, Twin Falls, Idaho 83301</u>
<u>Theodore W. W. Mangini</u>	<u>312 Meadows Lane, Twin Falls, Idaho 83301</u>

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

AEDMIN
312 Meadows Lane
Twin Falls, Idaho 83301

Phone number (optional):

208 308-7750

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Same as Above

Signature: Paula R. Mangini
(signature required)

Printed Name: Paula R. Mangini

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE
11/16/2005 05:00
CK: 7342 CT: 150010 BH: 922349
1 @ 25.00 = 25.00 ASSUM NAME # 2

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