

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2006 SEP -7 AM 9: 17

Please type or print legibly.

NOTE: See instructions on reverse before filing.	SECRETARY OF STATE
<ol> <li>The assumed business name which the undersigned</li> </ol>	STATE OF IDAHO I use(s) in the transaction of
business is: Ace Adventure P.I.	
2. The true name(s) and <u>business</u> address(es) of the elements business under the assumed business name:  Name	Complete Address
Xawrinel Amil 16900 Nam	pa Id. 83686
3. The general type of business transacted under the a	assumed business name is:
Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:	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  Phone number (optional):  208-407-0249
ignature: Smith  Printed Name: LAWRENCE Smith Capacity/Title: Owner  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  99/07/2006 05:00  CK: 1568 CT: 158018 BH: 973858  1 8 25.89 = 25.88 ASSUM MANE 8 2