## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 09 DEC -7 PH I2: 40 submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filling.

SECRETARY OF STATE STATE OF IDAHO

<ol> <li>The assumed business name which the undersigned business is:</li> </ol>	use(s) in the transaction of
Amulet Devices U.S.	
The true name(s) and business address(es) of the er business under the assumed business name:     Name	ntity or individual(s) doing  Complete Address
Amulet Devices U.S. ILC 1401 W	
(W88795) Box	
3. The general type of business transacted under the as	ssumed business name is:
Retail Trade Transportation and Pub  Wholesale Trade Construction	lic Utilities
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  Amulet Devices	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
1401 W. Idaho Suite 900 Boise ID 83702	(208) 334-2301
Name and address for this acknowledgment	
COPY IS (if other than # 4 above):	
	Secretary of State use only
Signature Ellh Jowles  (signature required)  Printed Name: PATRICK LAWLESS  Capacity/Title: President	
Printed Name: PATRICK LAWLESS	IDAHO SECRETARY OF STATE 12/07/2009 05:00
Capacity/Title: President	CK: 355667 CT: 172099 WH: 1198059 1 8 25.00 = 25.00 ASSUN NAME # 3
(see instruction # 8 on back of form)	

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