



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Arco Self Storage

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

Name

Barbara Bode

Complete Address

3067 North, 3350 West, Moore Idaho 83255

Jeff Bode

3067 North, 3350 West, Moore Idaho 83255

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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:

Arco Self Storage

PO Box 45

Arco Idaho 83213

Phone number (optional):

208-554-3708

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

Barbara Bode

3067 North, 3350 West

Moore Idaho 83255

Secretary of State use only

Signature:

(signature required)

Printed Name: Barbara Bode

Capacity/Title: Manager

(see instruction # 8 on back of form)

g1cc Form 1000 Rev 04/2003
Revised 04/2003

IDaho SECRETARY OF STATE
04/19/2004 05:00
CK: 6507 CT: 158010 BH: 740135
1 @ 25.00 = 25.00 ASSUM NAME # 2

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