

Capacity/Title: Secretary

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2005 MAR -9 PM 12: 36 STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

AIG BUSINESS PROTECTION	
The true name(s) and business address(est business under the assumed business name Name AIG CONSULTANTS, INC.	ne: Complete Address
The general type of business transacted u	nder the assumed business name is:
Retail Trade	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
COPY is (if other than #4 above): C. Dolor Corporation Service Company	
2711 Centerville Road, Suite 400 Wilmington, DE 19808 ture: Suite 400 (signature required)	Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STA OBJ 2005 05 CK: 1243736 CT: 74194 BH:

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