

SECRETIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

01 MAR -8 PH 2: 05

Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name STATE OF IDAHO

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

Alpha Omega Distributors

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

Name Shawn Mosqueda

Complete Address

29148 N Caribou Ave Athol, ID
83801

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

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

Phone number (optional): 208-683-0336

Shawn Mosqueda

29148 N Caribou Ave

Athol, ID 83801

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

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

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

Secretary of State use only

Signature: [Signature]

Printed Name: Shawn Mosqueda

Capacity: Owner

(see instruction # 8 on back of form)

Revision 12/98

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IDAHO SECRETARY OF STATE

03/08/2001 09:00
CK: 3017 CT: 141202 DI: 303470

1 @ 20.00 = 20.00 ASSUM NAME # 2

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