

Capacity/Title:_

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.

11 FEB -1 AM 9: 45

Please type or print legibly. Instructions are included on back of application.

STATE OF IDAHO

The assumed business name which the business is:	. ,
ENERGY MEDIC	-
The true name(s) and <u>business</u> address business under the assumed business in <u>Name</u>	s(es) of the entity or individual(s) doing
3. The general type of business transacted Retail Trade Transporta Wholesale Trade Constructi Services Agriculture Manufacturing Mining Finance, Insurance, and Real Est	ation and Public Utilities ion e Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: 377 delPhimium STAR TO 83469	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	ment
	Secretary of State use only
Signature: Jaul & Mengel	_
Printed Name: PAUL J Menze	<u>/</u>
Capacity/Title: <u>O ₩ № € R</u>	IDAHO SECRETARY OF STATE
Signature:	
Printed Name:	- D144962
Capacity/Title:	U197192