



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.

2003 AUG 28 AM 8:58
SECRETARY OF STATE
STATE OF IDAHO

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

Executive Rentals & Management

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

<u>Name</u>	<u>Complete Address</u>
<u>Bonny Shephera</u>	<u>407-2527</u>
<u>Kathi Duggan</u>	<u>571-9421</u>
<u>John Lewis</u>	<u>571-9432</u>

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 | |

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

7894 W. Holt Ct.
Boise, ID. 83704

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

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

(Office) Bonny Shephard
7894 W. Holt Ct.
Boise, ID. 83704

Phone number (optional):

877-702-0887

Signature: Bonny Shephard
(signature required)

Printed Name: Manager Bonny Shephard

Capacity/Title: Manager

(see instruction #3 on back of form)

Secretary of State use only

De 8409

IDAHO SECRETARY OF STATE
08/28/2003 05:00
CK: 1136 CT: 172600 BH: 698872
1 @ 25.00 = 25.00 ASSUM NAME # 2