

Printed Name:_

Capacity/Title:

(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.

07 AUG 20 AM 9: 24 SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersigned use(s) in the transaction of business is: Cace Home Cace B	
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Servues Inc. Cityles Inc.	
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Pull Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 206 F TNDiana Ave Court D'Alene. TD Stc 204	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
Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-765-3370
Signature: Sausie Sago Signature required)	Secretary of State use only

IDAHO SECRETARY OF STATE @8/20/2007 @5:00 CK: 13546 CT: 216665 BH: 1971622 1 8 25.88 = 25.88 ASSUM NAME 8 2

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