Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

2007 JUN 18 AM 9: 47

FILED EFFECTIVE

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

INTERMOUNTAIN THERMA	L Vision
The true name(s) and business address(es) of the business under the assumed business name: Name AMES A. HEAGNEY P	entity or individual(s) doing Complete Address 74 CEAR HAMOW DEATE NO IS 83204
. The general type of business transacted under the Retail Trade Transportation and Pt	
Wholesale Trade Construction	P. C.
Services Agriculture	Submit Certificate of
☐ Manufacturing☐ Mining☐ Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
INTERMODATION THERMAL MICION	PO Box 83720
VAMES A HEAGAEY	Boise ID 83720-0080
1174 MEDAR Hollow Poentelle, It	208 334-2301
5. Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 above):	208-232-1653
	Secretary of State use only
	

IDAHO SECRETARY OF STATE

06/18/2007 05:00

CK: NO CK # CT: 158010 BH: 1868456
1 8 25.00 = 25.00 ASSUM NAME # 1

D112452