

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

2005 MAY 23 AU 3: 46

Please type or print legibly. NOTE: See instructions on reverse before filing.

STATE OF STATE

2. The true name(s) and business address(es) of the business under the assumed business name: Name	he entity or individual(s) doing Complete Address
1/ - 1/	
5629 INVERVESS CT	
INAHO FALLS ID 83401	
The general type of business transacted under to	
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: KEITH HENDRICKSON, ARAGON 5629 INVERVESS CT IRANO FAUS ID 8340/	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):
	208 521 8059
	Secretary of State use only
nature: Acid Henry Inted Name: KEITH D HENDRICKSON pacity/Title: OWNER	
pacity/Title:	IDAHO_SECRETARY_OF_STATE
(see instruction # 8 on back of form)	05/23/2005 05:0

CK: 1312 CT: 158010 BH: 811742 1 0 25.00 = 25.00 ASSUM NAME # 2