

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED CAPELLINE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name 114 MAR -5 AM 9: 02

Please type or print legibly

NOTE: See instructions on reverse before	filing. STATE OF IDAHO ~
The assumed business name which the under business is:  ADA  Countrie  A'  A'  Countrie  Coun	rsigned use(s) in the transaction of
ADA-County Air	C ZAPLETS
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  COX	
3. The general type of business transacted under	er the assumed business name is:
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  AIR EXPERTS  9 N. DEWEY AVE  MODCETON ID 83644	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):	Phone number (optional): 208-585-5868
9N. DEWEY AVE Mi DOCETON ID, 83644	Secretary of State use only
Signature:	Security of State 03/05/2004 05:00
Capacity: See instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  3/05/2004 05:00  CK: 2370 CT: 177170 BH: 731177  1 0 25.00 = 25.00 ASSUM NAME #