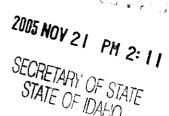
(see instruction # 8 on back of form)



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly. NOTE: See instructions of



1 The commend business name which the	OF IDAHO
 The assumed business name which the u business is: 	Indersigned use(s) in the transaction of
FMG Systems	
2. The true name(s) and business address(e business under the assumed business na Name Raymond 5. Gill	es) of the entity or individual(s) doing ame: Complete Address 6817 E. French Gulch Red Coeurs Alene Ip. 83814
3. The general type of business transacted u	under the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: 6817 E. French Gulch Rd. Coeurd Alene ID 83814	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgm copy is (if other than # 4 above):	Phone number (optional): (208) 676-9090
	Secretary of State use only
inted Name: Raymond J. Gill apacity/Title: Owner	Corpilormstabn formstabn p65 Revised 04/2003

IDAHO SECRETARY OF STATE
11/21/2005 05:00
CK: 47192701226 CT: 158010 BH: 923242
1 8 25.00 = 25.00 ASSUM NAME # 2