CERTIFICATE OF	FILED EFFECTIVE
ASSUMED BUSINESS	
Pursuant to Section 53-504, Idaho Code, t	he undersigned ZUUTSEP = 7 APTIT: 43
submits for filing a certificate of Assumed E Please type or print legibly.	Business Name. SEURETARY OF STATE STATE OF IDAHO
NOTE: See Instructions on reverse befo	pre filing.
1. The assumed business name which the un	dersigned use(s) in the transaction of
business is:	
<u> </u>	Networks
2. The true name(s) and business address(es	s) of the entity or individual(s) doing
business under the assumed business nan Name	Complete Address
AR Consulting LLC	6224 5 Stor Struk A.
	Boise, ID 83709
3. The general type of business transacted up	nder the assumed business name is:
Retail Trade Transportatio	n and Public Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of Assumed Business
Manufacturing Mining Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Idaho Secretary of State
correspondence should be addressed:	450 N 4th Street PO Box 83720
6224 5 Star Struck	
Poise, ID 83709	(208) 334-2301
<ol><li>Name and address for this acknowledgm COpy is (if other than # 4 above):</li></ol>	ient
	Secretary of State use only
Signature: And the	Mms/sabn
Printed Name: Andy Rupe	IDAHO SECRETARY OF STATE
Capacity/Title: Owner	5 09/07/2007 05:00 6 01: 217289 BH: 1874516
(see instruction #8 on back of form)	1 9 25.98 = 25.88 ASSUM NAME 0