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(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on revers To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the under gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: C VENTILATION & REFRIGERATION 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name 817 SOUTH 5th STREET ABRAM GARCIA RUPERT, IDAHO 83350 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): (208) 436-4205 correspondence should be addressed: ABRAM GARCIA Submit Certificate of Assumed Business 817 SOUTH 5th STREET Name and \$20.00 fee to: RUPERT.IDAHO 83350 Secretary of State 700 West Jefferson Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only Revision 2/97 12/22/1997 09:00 CK: CRSH CT: 91481 FH: 65844 Signature/ 1 8 20.00 = 20.00 ASSUM NAME Printed Name:

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