



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 on reverse before filing.

FILED EFFECTIVE
2005 MAR 24 AM 9:20
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

R-N-L Mechanical And Refrigeration

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Robert Legg
Jennifer Schuyler

Complete Address

P.O. Box 272 Filer Idaho 83328
P.O. Box 272 Filer Idaho 83328

3. The general type of business transacted under the assumed business name is:

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

Robert Legg
P.O. Box 272
Filer Id 83328

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

Phone number (optional):

208 338-4084

5. Name and address for this acknowledgment copy is (if other than # 4 above):

SHINE

Secretary of State use only

Signature: Robert Legg (Signature required)

Printed Name: Robert Legg

Capacity/Title: Corporate Officer

(see instruction # 8 on back of form)

Form 1000
Signature
04/20/03
g:\forms\1000\1000.sbn.p65

IDAHO SECRETARY OF STATE
03/24/2005 05:00
CK: 1387 CT: 158010 BH: 800464
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 85978