CERTIFICATE OF ASSUMED BUSINESS NAME
(Please type or print legibly. See instructions on reverse.) Pursuant to Section 53-504, Idaho Code, the undersigned

	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:	
	AFFORDABLE SERVICES	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	william M. Manker JR	ity or individual(s) doing  omplete Address  2/44 A randviru br. V.  Twin Falls, Id. 83301
		Twin Fulls, Id. 83301
3.	The general type of business transacted under the assumed business name is:	
	Services Agriculture Fil	ransportation and Public Utilities nance, Insurance, and Real Estate ining
4.	correspondence should be addressed:	
	AFFordable Services  2144 Grandview Dr. North	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.   (	Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
-	8	Secretary of State use only
	00/1/ · · · · · · · · · · · · · · · · · ·	IDAHO SECRETARY OF STATE

Signature: Mulliam M. Manker J.

Capacity: Seneval Purtner

(see instruction # 8 on back of form)

CK: 1023 CT: 141567 BH: 375865

1 0 20.00 = 20.00 ASSUNT NAME # 2

D-412235