

CERTIFICATE OF **ASSUMED BUSINESS NAME**

FILED EFFECTIVE

D85209

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

2005 MAR -4 AM 9: 21

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF ATE

| The assumed business name which the business is: | |
|--|--|
| business under the assumed business i | name: |
| <u>Name</u> | Complete Address |
| Henrik Isaksson | P.O. Box 712, Rathdrum, ID 83858 |
| Lynne Isaksson | P.O. BOX 712 , Rothdrum, ID 83858 |
| | |
| Retail Trade Transporta Wholesale Trade Constructi Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta 4. The name and address to which future correspondence should be addressed: ABSOLUT ELECTRIC PD. Box 112 Rathdrum, ID 83858 | Submit Certificate of Assumed Business |
| 5. Name and address for this acknowledg | gment Phone number (optional): |
| CODY iS (if other than # 4 above): | 208-687-8646 |
| | Secretary of State use only |
| Signature: (signature required) Printed Name: HONKIK SALSON Capacity/Title: OUNER (see instruction # 8 on back of form) | IDAHO SECRETARY OF STATE 93/04/2005 05:00 CK: 3427 CT: 158818 BH: 796691 1 8 25.88 = 25.88 ASSUM NAME # 2 |