

Capacity/Title: ONNER

ised instruction # 3 on back of form

## CERTIFICATE OF ASSUMED BUSINESS NAMELED EFFECTIVE

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

96 OCT -2 AHH: 52

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SEE STATE

2.	business under the assumed business name  Name	ntity or individual(s) doing  Complete Address  14 N. Noble Fix AV
		SE, IA 83713
<b>5</b> .	The general type of business transacted under the a  Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Mariufacturing Mining Finance Insurance and Real Estate	
	The name and address to which cuture correspondence should be addressed.  Stacy WARE (OR) Ambient Air 544 N. Noble Fix AV  Boise, ID 83713	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5	Name and address for this acknowledgment copy is a other than # 4 above.	Phone number (optional):

IDAHO SECRETARY OF STATE

10/02/2006 05:00

CK: CASH CT: 158810 BH: 978137
1 0 25.00 = 25.00 ASSUM MANE # 2

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