CERTIFICATE OF ASSEMED BUSINESS NAME (Please type or print give see instructions on reverse.)	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 3-904, Idaho Code, the undersign of Section 2: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2:	
1. The assumed business field which the undersigned use(s) in the train sacion of business is: \[\(\text{Line } \) \(
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Mill Direct Flooring	Complete Address つ。 るき 300チ
JOHN DUOYSEK	Hwy 95 S.
	BONNERS FERRY, J.D. 83805
3. The general type of business transacted un (mark only those that apply)	der the assumed business name is:
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
 The name and address to which future Pl correspondence should be addressed: 	hone number (optional):
Mill Direct Flooring POBOX 3007	Submit Certificate of Assumed Business Name and \$20.00 fee to:
BONDERS FRYY ID 83805 5. Name and address for this acknowledgmen copy is (if other than # 4 above):	
COPY 13 (if other than # 4 above).	PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
	12/18/1998 09:00
Signature: Dvorsek	CN: 1183/3983 CT: 47146 BH: 171459
Printed Name: SOHN DV OV SEK	1 # 29.88 = 20.88 ASSUM NAME # 2
Capacity: PresideNT (see instruction # 8 on back of form)	D91093
(See insuración # o on pack of form)	[8