CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)	
To the SECRETARY OF STATE, STA	ATE OF IDAHO
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 և	indersigned weeks that
business is:	indersigned use(s) in the transaction of _
KELLY TOPONCE GUE	ST Kanch
2. The true name(s) and business address(e	es) of the entity or individual(s) doing
business under the assumed business na	me is/are:
Name	Complete Address
LUCHARL CHAMBERS Racing StAB	LE, LHC 1605 SHAHLUCK AVES.
C1310204	Oc.
0/24204	RENTOH, Wa. 98055
 The general type of business transacted u (mark only those that apply) 	nder the assumed business name is:
Retail Trade Manufacturin Wholesale Trade Agriculture Services Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
 The name and address to which future for correspondence should be addressed: 	Phone number (optional): 204 (487347
MICHAEL E EILEEN CHAMBERS	
	Submit Certificate of
703 ELKELLY TOPONCE Rd	Assumed Business
	Name and \$20.00 fee to:
Bancrost, Id. 83217	Speroton, of State
0 '	Secretary of State 700 West Jefferson
Name and address for this acknowledgmer	nt Basement West
CODY IS (if other than # 4 above):	PO Box 83720
	Boise ID 83720-0080
	208 334-2301
	Secretary of State use only
	IDAHO SECRETARY OF STATE
Signature Chenn Chamser	IDAHO SECRETARY OF STATE 11/03/2000 09:00 CK: 11969 CT: 138869 BH: 358723
Printed Name: SILECA M. CHAMBERS	1 9 00 00 - 00 00 000m save u o
Capacity: Seco / 16 doin	1 e co. ee = 20. ee HSSUH NAME # 2

(see instruction # 8 on back of form)