CERTIFICATE OF ASSUMED BUSINESS NAME

	the SECRETARY OF STATE, STATE OF I Pursuant to Section 53-504, Idaho Cod	e, the undersigned gives notice of	
ad	option of an Assumed Business Name.	SECRETATE OF 10 A 12	
1.	The assumed business name which the unbusiness is:	dersigned use(s) in the transaction of	
	C and M Ente	erprises	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	<u>Name</u>	<u>Address</u>	
	Michael A Wilcox	Rte 2 Box 372 ON Town Ida	
		01,00	
3.	The general type of business transacted ur	ider the assumed business name is:	
-	1, 3, 4, 9		
	See categories on the reverse		
4.	The name and address to which correspondence should be addressed: Michael A. Wilcox		
	Rte 2, Box 372, Oldfown Id. 83822		
Signed Mihad a livilar			
	Ву		
	Capacity_	owner	
	Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer#	
	Secretary of State	Secretary of State use only	
	700 West Jefferson	I IDAHO SECRETARY OF STATE	
	PO Box 83720	DATE 02/21/1997 0900 66092 2	
	Boise ID 83720-0080	CX #: 1 CUST# 76930 ASSUM NOME 10 20.00= 20.00	
	manufacture films		