Capacity:___

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS MILED (Please type or print legibly)



To the SECRETARY OF STATE, STATE OF IDAHO99 JUN 18 AM 9: 03

Pursuant to Section 53-504, Idaho Code, the gives notice of adoption of an Assumed Bus	SINESSTAPENOR IDAHU		
 The assumed business name which the undersigned use(s) in the transaction of business is:			
		JASON Phillips	5900 Fairchild
			huna 10, 00054
3. The general type of business transacted under the assumed business name is: (mark only those that apply)			
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Transportation and Public UtilitiesFinance, Insurance, and Real EstateMining		
4. The name and address to which future correspondence should be addressed: 5900 Fairchild	Submit Certificate of Assumed Business Name and \$20.00 fee to:		
KunA Id. 85654	Secretary of State 700 West Jefferson Basement West		
5. Name and address for this acknowledgment copy is (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080 208 334-2301		
P.O. Box 6	INCHOSECRETARY OF STATE & Only		
Nampa-ID 83653-0006	G6/18/1999 09:60 CX: 29536 CT: 45686 TH: 226964		
Signature:	$\sim \alpha \sim 1$		
Printed Name:	D 26965		