FILED/EFFECTIVE

CEF	RTIFICATE OF ASSUMED BUT (Please type or print legibly. See instruction)	SINE	ESS NAME
To the SECRETARY OF STATE, STATE 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 under business is: PORTER'S Truck & Au		;][
2.	The true name(s) and business address(es) of business under the assumed business name Name	of the e is/are:	entity or individual(s) doing : Complete Address
	Tracey James Porter 4		E 280 IV Rigby Id. AS ABOVE 83442
3.	The general type of business transacted und (mark only those that apply)	er the a	assumed business name is:
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining Hm. 208 745 7964 4. The name and address to which future Phone number (optional): 305. 208. 538-7236			
	Tracey Porter		Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgment copy is (fother than # 4 above):		Secretary of State 700 West Jefferson Basement West PO Ec:: \$3720 Boise ID 83720-0080 208 334-2301
Signat	694 N. 4146E. Rigby Id 83442	Aura-in 2197	\$ecretary downs.6EGGEJARY OF STATE 11/15/2000 09:00 CK: 2081 CT: 138465 8H: 360773 1 0 28.00 = 20.00 ASSUM NAME # 2
Printed Name: Tracey Porter Capacity: Owner operator D40469			
	(\$44 instruction # 5 on back of form)	1	·