CERTIFICATE OF ASSUMED BUSINESS NA PREFFECTIVE (Please type or print legibly. See instructions on reverse.)	
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 undersigned use(\$) in the transaction of business is:  ———————————————————————————————————	
2. The true name(s) and business address(s) business under the assumed business name  Name  Michael Vackson	es) of the entity or individual(s) doing ame is/are:  Complete Address Po Box 190153  Borsé, 10 837/9-0153
3. The general type of business transacted under the assumed business name is:  (mark only those that apply)  Retail Trade	
Services Construction Mining  4. The name and address to which future Phone number (optional): 208-888-1020 correspondence should be addressed:  Michael Jackson	
1296 E. Sharptail St Maridia In Carre	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
Signature: Muhalfach  Printed Name: Michiel Jackson  Capacity: President  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  10/31/2001 05:00  CK: 1040 CT: 110214 BH: 427122  1 2 20.00 = 20.00 ASSUM NAME # 3