## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

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± 0	To the SECRETARY OF STATE, STATE  Pursuant to Section 53-504, Idah  gives notice of adoption of an Ass  The assumed business name which the unc	no Code, the sumed Busi	e undersigned 41 9: 27 iness Name State (All 9: 27
1.	business is:		
	WOOD CREATIONS AND OTHER MA	TERIAL T	THINGS
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	Name Julia R. Ziealer 17	Co	omplete Address
	Julia R Ziegler 17  Joseph E. Ziegler 17	MR N. AM	Front In Viena ID AZESA
	Joseph C. T. J.		(cu tr) Num un.
3. The general type of business transacted under the assumed business name is (mark only those that apply)			umed business name is:
	<ul><li>☒ Retail Trade</li><li>☒ Manufacturing</li><li>☒ Wholesale Trade</li><li>☒ Agriculture</li><li>☒ Construction</li></ul>	Fin	ansportation and Public Utilities nance, Insurance, and Real Estate ining
	The name and address to which future Phone number (optional): correspondence should be addressed:		
	1703 N. Andrew Ln Kuna ID 83634		Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
	ATTN: J. Ziegler		Secretary of State 700 West Jefferson
	Name and address for this acknowledgment copy is (if other than # 4 above):		Basement West PO Box 83720 Boise ID 83720-0080
			208 334-2301

g:\corp\forms\abn.p65

Signature:\_

Printed Name: 10

Capacity: Quaer

(see instruction # 8 on back of form)

Secretary of State use only 10AHO SECRETARY OF STATE

**03/05/2001 09:00** CK: 1546 CT: 143865 BH: 382478

1 8 26.00 = 20.00 ASSUM NAME # 2

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