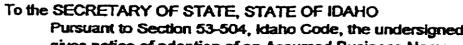
## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)





gives notice of adoption of an Assume		
1. The assumed business name which the ubusiness is:	undersigned use(s) in the transact	ion I
The true name(s) and business address(e business under the assumed business named business	ু es) of the entity or individual(s) do	ing E
<u>Name</u>	Complete Address	7 <b>5</b>
Orville John Rice Allison Dee Rice	239 Diana Dr 239 Diana Dr	
3. The general type of business transacted to (mark only those that apply)    A w way   Retail Trade   Manufacturing   Manufacturing   Agriculture   Services   Genstruction	Distributor Ship  In Transportation and Pu  In Finance, Insurance, ar	blic Utilities
correspondence should be addressed:  Rice Enterprise's  239 Diana Dr.	Phone number (optional): 677  Submit Certificate of Assumed Business Name and \$20.00 f	
5. Name and address for this acknowledgme copy is (Fother than #4 shows):  Zions BANK	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-006 208 334-2301	i Name
BURLEY, Id. 83318  mature: Owille John Rice	Secretary of State use	enly
pacity: Owner  (see Instruction # 8 on back of form)	IDAHO SECRETARY OF CX: NO CK # CT: 18933	00
	1 8 28.88 = 28.88 D2)89	ASSUM NAME # 2