	CERTIFICATE OF ASSU (Please type or print legibly.) To the SECRETARY OF STATE, STA	See instru	uctions on reverse.)	ME FLED
	Pursuant to Section 53-504, Id gives notice of adoption of an	laho Code Assumeda	the undersigned	
1.	The assumed business name which the ubusiness is: ON Hand	ındersigne	ed use(s) in the transac	tion of
2.	The true name(s) and business address(e business under the assumed business na	es) of the o		oing
	Roberta Borce	69 E	Complete Address 19 S Rex	burg ID
	Heather Williams	69 E	1st S Rexburg	ID 83440
3.	The general type of business transacted usiness tra	ng 🗌	Transportation and P Finance, Insurance, a Mining	ublic Utilities W
4.	The name and address to which future Phone number (optional): correspondence should be addressed:			
	Rexburg, ID		Submit Certificate Assumed Busines Name and \$20.00	s
5.	5. Name and address for this acknowledgme copy is (if other than # 4 above):		Secretary of State 700 West Jefferso Basement West PO Box 83720 Boise ID 83720-00 208 334-2301	on .
		1/88	Secretary of State us INNO SECRETARY OF	STATE
Signatu	ITE: Sakerty & Brie	Revision 1/88	09/21/1998 CK: 1812 CT: 194243 1 8 28.08 = 28.08	
	Name: ROBERTA W. BOICE	ms\ebn.p65	6	
Capaci	ty: Seneral Partner	1	D 120	133

(see instruction # 8 on back of form)