

CERTIFICATE OF ASSUMED BUSINESS NAME FILED

(Please type or print legibly. See instructions on other page.)

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.

02 FEB -2 1998 09:00

STATE OF IDAHO

1. The assumed business name which the undersigned uses(s) in the transaction of
business is:

Ralph Huskinson Family Partnership

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	Complete Address
Randy Huskinson	P.O. Box 670 Rexburg, Id 83440
Mike Huskinson	P.O. BOx 670 Rexburg, Id 83440

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input checked="" type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future
correspondence should be addressed:

Ralph Huskinson Family Partnership

P.O. Box 670

Rexburg, Id 83440

Phone number (optional): _____

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

IDAHO SECRETARY OF STATE
Secretary of State use only
02/02/1998 09:00
CK: 5662 CT: 1862 BH: 76068
1 e 20.00 = 20.00 ASSUM NAME

Signature: X Mike Huskinson

Printed Name: Randy Huskinson/Mike Huskinson

Capacity: General Partner/General Partner

(see instruction # 8 on other sheet)

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