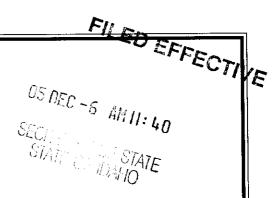
## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)



1394236

1. The assumed business name which the unbusiness is:  \[ \frac{\frac{1}{AMMER} \frac{1}{EAL}}{\left(0)} \] (0.00)	
2. The true name(s) and <u>business</u> address(est business under the assumed business name  Name  MAX D. LORANCER  TON C. AIBRIGHT  3. The general type of business transacted under the assumed business address(est business)	Complete Address  739. N. MORNINGSIDE WY 53  """""""""""""""""""""""""""""""""""
	Submit Certificate of Assumed Business Name and \$25.00 fee to:
5. Name and address for this acknowledgm copy is (if other than # 4 above):	nent Phone number (optional):
Mais Frances	Secretary of State use only
Printed Name: MAX DEPARTER  Capacity/Title: DWNER	1 DAHO SECRETARY OF STATE 12/06/2005 05:00 CK: 1030 CT: 158010 BH: 925344 1 0 25.00 = 25.00 ASSUM NOME # 2