CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) 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. The assumed business name which the undersigned use(s) in the transaction of business is:

1.	The assumed business name which the undersigned use(s) in the transaction of the business is:	
	SUN VALLEY PC ASSISTA	NCE
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 Com LARKT S. ROBINSON 1221 SILVE	Plete Address R.STAR, HAILEY, IP 23333
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)	
		sportation and Public Utilities nce, Insurance, and Real Estate ng
4.	The name and address to which future Phone number (optional): correspondence should be addressed:	
	ACCEP PC ASSISTANCE	Submit Certificate of
	P.O. 30+ 673	Assumed Business Name and \$20,00 fee to:
	HAILEY, 10, 83333	Secretary of State
		700 West Jefferson
5.	Name and address for this acknowledgment	Basement West PO Box 83720
	COPY IS (if other than # 4 above).	Boise ID 83720-0080
		208 334-2301
		Secretary of State use only
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Signature: famy S. Robinson

Printed Name: LARRY S. ROBINSON

Capacity: OWNER

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE 11/21/2001 05:00 CK: 2629 CT: 153855 BH: 438897 1 0 20.00 = 20.00 ASSUM NAME # 2

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