FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned 18 Ald 9: 18 submits for filling a certificate of Assumed Business Name.

Please type or print legibly. THE STATE OF STATE

NOTE: See instructions on reverse before 1. The assumed business name which the unbusiness is: SNAKE River Tree See	edersigned use(s) in the transaction of
2. The true name(s) and business address(es business under the assumed business name Name Brett T. Dixon Lynett S. Dixon	
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Brett D'xon 233 Frontier R& Terome Id 83338	der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgmen copy is (if other than # 4 above).	t Phone number (optional):
Signature: But (signature required) Printed Name: Brett Dixon Capacity/Title: 6wner (see instruction # 8 on back of form)	Secretary of State use only Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE OB/18/2003 05:00 CK: 1937 CT: 158919 BH: 696888 1 9 25.00 = 25.00 ASSUM NAME # 2

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