

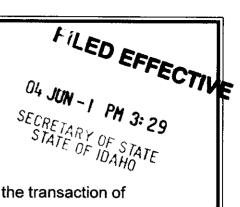
CERTIFICATE OF ASSUMED BUSINESS NAME

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)



D76954

1. The assumed business name which the und business is:	dersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) business under the assumed business nam Name Neal D SwenSou	e: <u>Complete Address</u> 9233 Technool IN. Boise
3. The general type of business transacted unc	der the assumed business name is:
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: 9233 + 20 k wood N. 100354 TO 6370N	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 acknowledgment copy is (if other than # 4 above): 	nt Phone number (optional): 268 - 889 - 8432
	Secretary of State use only
Signature: New Sanature required) Printed Name: New O Swav Sow Capacity/Title: Owner	IDAHO SECRETARY OF STATE ### CK: CASH CT: 158610 BH: 748231 1 0 25.00 = 25.00 ASSUM NAME # 2