

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO FILED/EFFECTIVE

	i3-504, Idaho Code, the undersigned on of an Assumed Business Name.
	hich the undersigned use(s) in the transaction of
business is:	3
Plumb-Co. Supply, a branch	of Consolidated Supply Co. Oregon
The true name(s) and business a business under the assumed bus Name	address(es) of the entity or individual(s) doing siness name is/are:
Consolidated Supply Co.	Post Office Box 5788
-	Portland, Oregon 97228
15.	
The general type of business tran (mark only those that apply)	nsacted under the assumed business name is:
Wholesale Trade	
correspondence should be address	essed:
Consolidated Supply Co.	Submit Certificate of
Post Office Box 5788	Assumed Business Name and \$20.00 fee to:
Portland, Oregon 97228	Secretary of State
5. Name and address for this acknow copy is (if other than # 4 above): David G. Post Miller Nash LLP	700 West Jefferson
111 S.W. Fifth Avenue	Secretary of State use only
Portland, Oregon 97204	IDANO SECRETARY OF STATE
ignature: <u>Jan E. Mayant</u>	12/27/2000 69:00 CX: 161% CT: 19577 BH: 369367
rinted Name: Karl E. Neupert	1 6 20.96 = 20.90 ASSUM NAME # 9
Capacity: President	7) 413.84
(see instruction # 8 on back of form)	D 41384