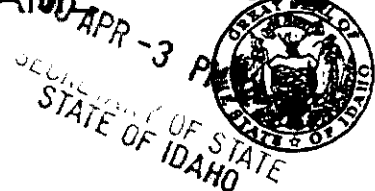


CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED/EFFECTIVE



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.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

FAUNAL ANALYSIS AND CRM SERVICES

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	Complete Address
<u>SUSANNE J. MILLER</u>	<u>1450 ANTARES DR. IDAHO FALLS, ID 83402</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 208-529-2453

SUSANNE J. MILLER
FAUNAL ANALYSIS AND CRM SERVICES
1450 ANTARES DR.
IDAHO FALLS, ID 83402

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208-333-3000 SECRETARY OF STATE

6478472000 09:00
CH 2442 CTS 120000 IN 385367

1 @ 20.00 = 20.00 ASSUM NAME # 2

Signature: Susan J. Miller

Printed Name: SUSANNE J. MILLER

Capacity: SOLE PROPRIETOR

(see instruction # 8 on back of form)

Revision 2/97

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