		/E-Pa-	
	CERTIFICATE OF ASSU (Please type or print legibly.	Socinetructions on reverse )	
	To the SECRETARY OF STATE, ST Pursuant to Section 53-504, logives notice of adoption of an	A * 4.	
1.	The assumed business name which the business is:  Cal tara	- Up 175 2 1 3 1	
2.	<ol> <li>The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:</li> </ol>		
	<u>Name</u>	Complete Address	
	Peter D. Beebe	Pot With ID 83855 Po Box 583	
		<del></del>	
3.	The general type of business transacted (mark only those that apply)	under the assumed business name is:	
	Retail Trade  Manufactur  Moderate Agriculture  Services  Construction	Finance, Insurance, and Real Estate Mining	
4.	The name and address to which future correspondence should be addressed:	Phone number (optional): 208 875 028 7	
	Caltara POBOX 583 Potlatuh ±0 8385	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:	
	Potlatch ID 8385	Secretary of State	
5.	Name and address for this acknowledgm copy is (if other than # 4 above):	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
	·	Secretary of State use only  IDANO SECRETARY OF STATE	
		E	

Signature: Peter D. Beech Printed Name: Peter D. Beebe Capacity: <u>Dwner</u>

(see instruction # 8 on back of form)

CK: 7910 CT: 132889 BH: 324399

1 2 20.00 = 20.00 ASSUM NAME # 2

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