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

FILED To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned

	gives notice of adoption of an As	- • •	
1.	The assumed business name which the unbusiness is:	STATE OF IDAHO	
2.	The true name(s) and business address(est business under the assumed business name Name David Waadhead	, , , ,	
3.	The general type of business transacted un (mark only those that apply) Retail Trade	g Transportation and Public Utilities Finance, Insurance, and Real Esta Mining	
4.	The Lamphouse Theal 223 5th Ave South Twin Falls, Idaho 83	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson	
5.	Name and address for this acknowledgmer copy is (if other than # 4 above):		
		Secretary of State use only IDANG SECRETARY OF STATE	
natu	ure: David Woodhead	05/28/1999 09:00 CK: 1861 CT: 116176 BH: 221893	

Printed Name: David Woodhead

Capacity: Owner/manager

(see instruction # 8 on back of form)

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