(see instruction # 8 on back of form)

**CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 63-504, Idaho Code, the undersigned submits for filling a certificate of Assumed Business Name. 02 JUN - 7 AM 9: 49

STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersite business is:	gned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name:  Name  Sactool Woodwards In 218	e entity or individual(s) doing  Complete Address  いろんは ちて かいまてのおかい
3. The general type of business transacted under the Retail Trade Transportation and I Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	: # }
4. The name and address to which future correspondence should be addressed:  John Harl  218 w 36 th ST  BUISE TO 83714	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 53720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional):
Signature: Alane: John F. Hart	Secretary of State use only
Printed Name: John F. Hant  Capacity: President	IDANG SECRETARY OF STATE

CK: 14711 CT: 161883 BH: 478284 1 8 28.88 = 28.88 ASSUN MANE # 4