CERTIFICATE OF ASSUMED BUSINES (Please type or print legibly. See instructions on re
To the SECRETARY OF STATE OF IDALIA

	CERTIFICATE OF ASSUI	MED BUSINESS NAME See instructions on reverse.)
1.	To the SECRETARY OF STATE, STA- Pursuant to Section 53-504, Ida gives notice of adoption of an As The assumed business name which the un business is:	ho Code, the undersigned ssumed Business Name.
	Boise Park-n- Sel	
2.	The true name(s) and business address(es business under the assumed business names.	s) of the entity or individual(s) doing he is/are:
	<u>Name</u>	Complete Address
	Walter C. Lowe	
		Baise, Id. 83706
3.	The general type of business transacted un (mark only those that apply)	ider the assumed business name is:
	Retail Trade	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future P correspondence should be addressed:	hone number (optional):
	102 N. Orchard Boise, Id. 83706	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
5.	Name and address for this acknowledgmen copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		Secretary of State use only
	steat of	IDAHO SECRETARY OF STATE

Signature: Walton C. Lowe

Printed Name: Walter C. Lowe

Capacity: <u>owner</u>

(see instruction # 8 on back of form)

11/21/2000 09:00 CK: CASH CT: 118637 PH: 362214

1 @ 28.08 = 20.00 ASSUM NAME # 2

1,40664