CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)		
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 NameCRETARY OF STATE \$TATE OF IDAHO		
1. The assumed business name which the undersigned use(s) in the transaction of business is: TRIPLE "I MANCE "L" TRACERS		
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	John Hammist	Complete Address F65 DANKE COUNT MIN HOME 10830
		965 DRAKE COURT MIN HOUR 18 8360
3.	TEKERY BUSK TANET BUSK The general type of business transacted u (mark only those that apply)	965 DRAKE COURT MTN Hours 18 836 d
	Retail Trade	Finance, Insurance, and Real Estate Mining
4.	The name and address to which future correspondence should be addressed:	Phone number (optional): 208-582-7574
	TRIPLE I and L TRACERS 965 DRAKE COURT	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Mountain Home 1D 83647 Name and address for this acknowledgme copy is (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080
		208 334-2301
	· · · · · · · · · · · · · · · · · · ·	Secretary of State use only IDAHO SECRETARY OF STATE
Signature:		
1 0 20.00 = 28.00 ASSUM NAME # 2		
Capacity: Ganga Parting (see instruction # 8 on back of form)		