f	CERTIFICATE OF ACOUNTS	
	(Please type or print legibly) To the SECRETARY OF STATE OF A TO THE	ESS NAME
	Pursuant to Section 53-504, Idaho Code, the undersigned	
	business is:	in the named ction of
	2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	Name Name	Complete Address
	GARDEN VALLEY ID. 83622	
	2 7	83622
	The general type of business transacted under the assumed business name is: (mark only those that apply)	
	Services	ransportation and Public Utilities inance, Insurance, and Real Estate lining
	4. The name and address to which future correspondence should be addressed:	
	JOE An Thomy	Submit Certificate of
	P.O. BOX 511	Assumed Business Name and \$20.00 fee to:
	GARDEN VALLEY, ID. 83622	Secretary of State
	5. Name and address for this acknowledgment	700 West Jefferson Basement West
	Copy is (if other than # 4 above):	PO Box 83720
		Boise ID 83720-0080 208 334-2301
		Secretary of State use only
Sig	gnature: Joseph & Rothons	
Pri	inted Name: Toseph F. Anthony	IDAHO SECRETARY OF STATE 08/01/2002 05:00 CK: 98899569506 CT: 158010 BH: 488267
Capacity:		
	(see instruction # 8 on back of form)	D 569478