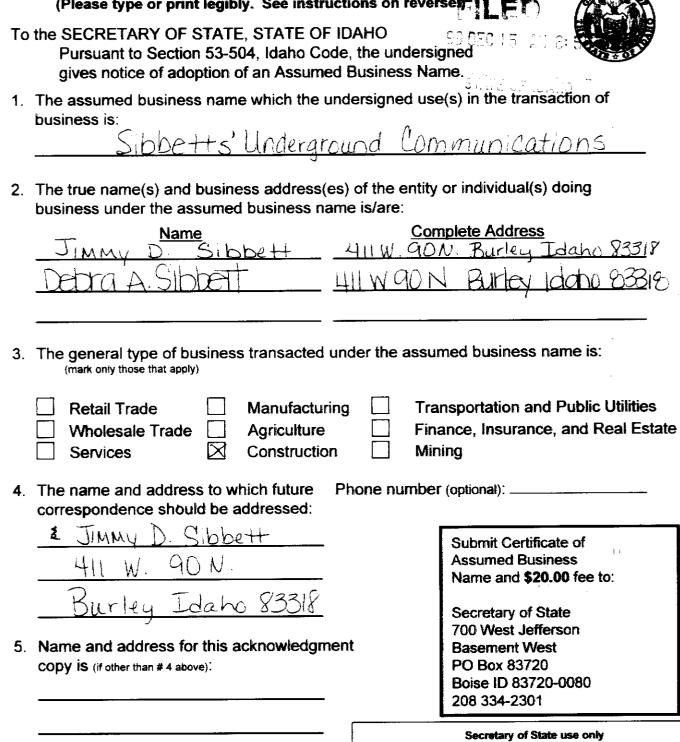
## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned



Signature: Printed Name: Capacity:

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

12/15/1999 09:00

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