227	
CERTIFICATE OF ASSUMED BUSINESS	NAME FILED EFFECTIVE
Pursuant to Section 53-504, Idaho Code, the undersigned US JAN 19 AM 9: 29 submits for filing a certificate of Assumed Business Name.	
Please type or print legibly. NOTE: See instructions on reverse befor	re filing. SECRETARY OF STATE STATE OF IDMO
<ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:</li> <li>LUSER LINE Flace ε Rail Co.</li> </ol>	
2. The true name(s) and business address(es) business under the assumed business nam Name <u>Mchael Dalessi</u> Wayne R Campbell	of the entity or individual(s) doing e: Complete Address <u>482 8<sup>12</sup> St. Iclubs Falls</u> , ID 83401 <u>1631 ROMARTICE Dr. Iclubs Falls F</u> D 83401
<ul> <li>3. The general type of business transacted und</li> <li>Retail Trade Transportation</li> <li>Wholesale Trade Construction</li> <li>Services Agriculture</li> <li>Manufacturing Mining</li> <li>Finance, Insurance, and Real Estate</li> <li>4. The name and address to which future correspondence should be addressed:</li> <li><u>482 8<sup>th</sup> 5f</u>.</li> <li><u>TAULO FAILS TA 83401</u></li> <li>5. Name and address for this acknowledgmer copy is (if other than # 4 above):</li> <li><u>ZiOns Bunk</u></li> <li><u>Lass</u> St. With</li> </ul>	and Public Utilities Submit Certificate of Assumed Businese Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 therefore the second secon
Idssister       Signature:         Idaho       Falls, ID       83402         Signature:       (signature required)         Printed Name:       Michael D       Dales;         Capacity/Title:       Partner         (see instruction # 8 on back of form)	Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE 01/19/2006 05:00 CK: 394184254 CT: 112633 BH: 932905 1 8 25.00 = 25.00 ASSUM NAME # 1