CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHIDG 23 2 09 FM 100 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.	
The assumed business name which the undersigned us business is:	e(s) in the transagtion of
_ Lolee and company	· · · · · · · · · · · · · · · · · · ·
The true name(s) and business address(es) of the entity business under the assumed business name is/are:	,, <u> </u>
Lean J Santarone 1787 Ra Buise	TD 83712
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
Wholesale Trade Agriculture Fin	insportation and Public Utilities ance, Insurance, and Real Estate ing
4. The name and address to which future Phone number (optional): 404-1956 correspondence should be addressed:	
1280 Raintree De	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgment	Secretary of State 700 West Jefferson Basement West
Some as above.	PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
Signature: Leah 5 Sentaine	IDAHO SECRETARY OF STATE 08/23/2000 09:00 CK: 1431 CT: 135142 BH: 343336 1 0 20.00 = 20.00 ASSUM NAME # 2
Capacity: (see instruction # 8 on back of form)	

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