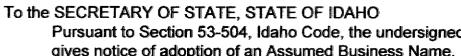
CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)





	Pursuant to Section 53-504, Idaho Cod gives notice of adoption of an Assumed	-	
1.	The assumed business name which the ur business is:	ndersigned u	se(s) in the transaction of
	EXCALIBUR TRUCK	ING	7 2
2.	The true name(s) and business address(est business under the assumed business name Name GIL CLEMENS	ne is/are: <u>Co</u>	
		NAMPA	ID
		8368°0	
3.	The general type of business transacted un (mark only those that apply)	nder the ass	umed business name is:
,	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Fi	ansportation and Public Utilities nance, Insurance, and Real Estate ning
4.	The name and address to which future F correspondence should be addressed:	hone numbe	er (optional): <u>208~466~6697</u>
	GIL CLEMENS		Submit Certificate of
á	1620 E SHERMAN		Assumed Business Name and \$20.00 fee to:
·	NAMPA ID 83486		Secretary of State
5.	Name and address for this acknowledgmer	nt	700 West Jefferson
.	COPY is (if other than # 4 above):		Basement West PO Box 83720
			Boise ID 83720-0080 208 334-2301
			Secretary of State use only
		Revision 2/97	Idaho secretary of state
Signatu	Signature: <u>Sil Clemens</u>		ATE 05/22/1997 95269 2
Printed	Name: GIL CLEMENS		#: CUST# 81848 SUM NAME 18 20.00= 20.00
Capacity: <u>OW NER</u>			
	(see instruction # 8 on back of form)	g tooptomistabn pm6	: D 4764