CERTIFICATE OF ASSUMED	BUSINESS NAME
(Please type or print legibly)  To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.  1. The assumed business name which the undersigned use(s) in the transaction of business is:	
Alliance Title & Escrot  2. The true name(s) and business address	N .
business under the assumed business n  Name Alliance Title & Escrow  of Jefferson County, LLP	Complete Address 205 Fremont Street
3. The general type of business transacted (merk only those that apply)  Retail Trade	ing Transportation and Public Utilities  Finance, Insurance, and Real Estate
Alliance Title & Escrow Corp Attn. Mark Tidd  380 E. Parkcenter Blvd., Sta Boise, ID 83706  5. Name and address for this acknowledgment copy is (Former to above).	Name and \$20.00 fee to:  Secretary of State
Signature:	Secretary of State use only
Printed Name: Mark Tidd	F 
CapacityCFO, Alliance Title & Escrow	
(see instruction # 3 on beck of form) Corporation Partner	IDAHD SECRETARY OF S DATE 06/10/199

DATE 06/10/1997
0900 100837 2
CX \*: 10000306 CUST\* 69757
RSSUM NAME 10 20.00= 20.00

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