CERTIFICATE OF ASSUMED BUSINESS NAME

97 JUN 1 1 AN 10: 45

#: p 5379

To the SECRETARY	OF	STATE,	STATE	OF	IDAHC)
101100				_	a and	

OF IDAHO

Code the undersigned gives motice of STATE

Pursuant to Section 53-504, Idaho Code, adoption of an Assumed Business Name.	the undersigned gives MAHO
1 The assumed business name which the unde	ersigned use(s) in the transaction of Mobile Sharpening Service
2. The true name(s) and business address(es) business under the assumed business name Name David M. Yound 2. Jennifer M. Yound	of the entity or individual(s) doing e is/are: Address 12 HARBOR PARK COURT POST FAILS ICH 11
3. The general type of business transacted un Services See categories on the reverse 4. The name and address to which correspond Dave Yound 212 HARBOR PARK CO	
Signed	David M. Pounts
Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080	Customer # Secretary of State use only IDAHD SECRETARY OF STATE DATE 06/11/1997 0900 101215 2 CX #: 3623 CUST# 82779 RSSLM NAME 18 20.00= 20.00