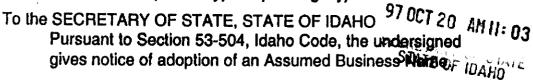
## CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)





1. The assumed business name which the undersigned use(s) in the transaction of business is:

Custom Carpentree Works

2.	The true name(s) and business address(es) of the entity or individual(s) doing	)		
business under the assumed business name is/are:				

Rick Allen Wheeler	5.1315	Complete Address	Post Falls ID.
Justin Travis Wheeler	10	same	· · · · · · · · · · · · · · · · · · ·
Joel Dillon Wheeler	17	Same	l i

3. The general type of business transacted under the assumed business name is: (mark only those that apply)

Betail Trade
Wholesale Trade
Services

Manufacturing
Agriculture
Construction

Transportation and Public Utilities
Finance, Insurance, and Real Estate
Mining

4. The name and address to which future correspondence should be addressed:

Rick AustWheeler 1916, 8th Cover d'Alene Idaha. 83814

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Insodore K. Wheeler SR

S.1315 Schilling LP. Post Falls ID. 83854

Signature: Reck a Wheeler

Printed Name: Rick A. Wheeler

Capacity:

OWNER

(see instruction # 8-per back of form)

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301

THOUGH SECRETORY OF STATE

1 8 28.88 = 20.00 ASSUM NAME

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