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

To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned? -9 AM 9: 06

gives notice	of adoption	of an Assumed	Business	Name.

	gives notice of adoption of an Assur	med Business Name.			
1.	The assumed business name which the under business is:	signed use(s) in the transaction of			
	BANKRAKY Petition	preseres offices			
		,			
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:				
	Name Therron Rockford V	So wanter H24			
	Do.	COMIO ID 83201			
3.	3. The general type of business transacted under the assumed business name is: (mark only those that apply)				
	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Transportation and Public UtilitiesFinance, Insurance, and Real EstateMining			
4.	4. The name and address to which future Phone number (optional): correspondence should be addressed:				
	NA	Submit Certificate of			
		Assumed Business Name and \$20.00 fee to:			
		Name and \$20.00 lee to.			
		Secretary of State			
		700 West Jefferson			
5.	Name and address for this acknowledgment	Basement West			
	COPY is (if other than # 4 above).	PO Box 83720			
	Na	Boise ID 83720-0080			
		208 334-2301			
		Secretary of State use only			
	98	IDANO SECRETARY OF STATE			

Printed Name: Therron Rudford

Capacity: Owner

(see instruction # 8 on back of form)

M4/M9/1999 M9: 00 CK: 1548 CT: 113836 BH: 285678

28.88 = 28.88 ASSUM WAVE # 2

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