CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) FILED To the SECRETARY OF STATE, STATE OF IDAHO ADRILL

Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of 1. The assumed business name which is business is: Mobile MARINE 2. The true name(s) and business addresses	f an Assumed Bus the undersigned us	iness Name. se(s) in the transaction of
business under the assumed business additional business under the assumed business additional business add	ss name is/are:	emplete Address
3. The general type of business transaction (mark only those that apply) Retail Trade	icturing	umed business name is: ansportation and Public Utilities nance, Insurance, and Real Estate ining er (optional): 342 - 5376
820 Clover DR. Boise		Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State
5. Name and address for this acknowled copy is (if other than # 4 above): 820 Clover DR, Boise 4		700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
gnature: Munic Lieb	Revision 1/88	Secretary of State use only IDANO SECRETARY OF STATE 04/26/1999 09:00 CK: none CT: 114597 BH: 218575 1 28.88 = 28.88 ASSUM NAME # 2

Sig

Capacity: OWNER

(see Instruction # 8 on back of form)

1) 25401