CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)	
To the SECRETARY OF STATE, STATE OF IDAHO 99 JAN 20 PH 1:16 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Busines On State of IDAHO	
1. The assumed business name which the undersigned use(s) in the transaction of business is: Stork A dd. t.ons	
<ol> <li>The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:</li> </ol>	
Name	Complete Address
Mark Ochkerking	SOC Meadowbrook Drive
Mark Ochlerking Sarah Clehlerking	SOC Meadowbrook Drive Nampa ID 83686
<ol> <li>The general type of business transacted under the assumed business name is: (mark only those that apply)</li> </ol>	
Retail Trade       Manufacture         Wholesale Trade       Agriculture         Services       Construction	e Finance, Insurance, and Real Estate on Mining
4. The name and address to which future correspondence should be addressed:	Phone number (optional): 208 463 0779
Stork Add. tions 500 Mandowbrook Drive	- Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
<ul> <li>Numpa, ID 83686</li> <li>5. Name and address for this acknowledge copy is (if other than # 4 above).</li> </ul>	Ment Secretary of State 700 West Jefferson Basement West PO Box 83720
	Boise ID 83720-0080 208 334-2301
	Secretary of State use only INARIO SECRETARY OF STATE
Signature: MM aller	61/21/1999 69:60 CK: 566 CT: 10924 KH: 166680
Printed Name: Mark Ochlerking	1 @ 28.89 = 28.88 ASSUM HAME # 2
Capacity: <u>Swiner</u>	- D22342
(see instruction # 8 on back of form)	

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