CERTIFICATE OF ASSUMED BUSINESS NAMES JAN 25 AM 8: 50 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business NOTE RETARY OF STATE Please type or print legibly. STATE OF IDAHO

Please type or print legibly.

The assumed business name which the unbusiness is: ABCHANDYM	•
The true name(s) and business address(es business under the assumed business name Name	
The general type of business transacted ur	nder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: 12366 W. CLOVER MEA	Idaho Secretary of State 450 N 4th Street PO Box 83720
 Name and address for this acknowledgme copy is (if other than #4 above). 	ent
	Secretary of State use only
ature: Lower & Ollen (signature required) ted Name: ROBERT E ALLEN acity/Title: OWNER	Sed until the secretary of State IDAHO SECRETARY OF STATE 01/25/2008 05: CX: 244 CT: 158916 BH: 189

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