CERTIFICATE OF ASSUMED BUSINESS NAMES	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.	
1. The assumed business name which business is: Fruit land Haating &	n the undersigned use(s) in the transaction of
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Kirk L. Cochran Hindy D. Cochran	P.O. Box 298 Fruitland, ID 83619 P.O. Box 288 Fruitland, ID 83619
3. The general type of business transacted under the assumed business name is: 9 Scrvicus (Huling & Owling) See categories on the reverse	
4. The name and address to which correspondence should be addressed: Fruitand Haltim & Cooling	
P.O. Box 288, Fruitla	nd, TD 83/019
Sig	ned Link J. Cahra
By <u>klandy h. (Whour</u> Capacity	
Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer #
Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080	Secretary of State use only IDAHO SECRETARY OF STAT DATE 05/22/1997 0900 95141 2 CK #: 18332849 CUST# 81812

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