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 in the transaction of business name which the undersigned use(s) in the transaction of business is:	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
<u>Name</u>	Complete Address
Mike Lewz P.	0. box 83 Melba ID 83641
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 4. The name and address to which future Phorocorrespondence should be addressed:	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining The number (optional): 208 495-2866
PO BOX 83	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgment copy is (Fother than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
m. 1 P	Secretary of State use only
Signature: ///per Jens	IDAHO SECRETARY OF ATT
Printed Name: ////// Lene	IDAHO SECRETARY OF STATE 1/1/2002 05:00 CK: 5340 CT: 155910 BH: 440796
(see instruction # 8 on back of form)	1 8 20.00 = 20.00 ASSUM NAME H 2
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