CERTIFICATE OF ASSUMED E (Please type or print legibly. See instru	BUSINESS NAME actions on reverse.)
Pursuant to Section 53-504, Idaho Co gives notice of adoption of an Assume	
The assumed business name which the u business is:	Indersigned use(s) in the transaction of
NORTH VALLEY LAND CO., AN IDAHO GENE	RAL PARTNERSHIP
The true name(s) and business address(e business under the assumed business na	es) of the entity or individual(s) doing me is/are:
COLIN CONNELL	P.O. BOX 2723
	BOISE IDAHO 83701
3. The general type of business transacted unit (mark only those that apply) Retail Trade Manufacturin Wholesale Trade Agriculture Services Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4. The name and address to which future for correspondence should be addressed: Colin Connell	Phone number (optional):
Box 2723	
Boise ID 83701	1 * 1 * 1 * 1 * 1 * 1 * 1 * 1 * 1 * 1 *
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	nt
	IDANO SECRETARY OF STATE 8 95/29/1998 99:00
Signature	OK: 4349 CT: 1316 BH: 112374
Printed Name: Lotin Coune!	
Capacity:	D-15/47
(see instruction # 8 on back of form)	A the state of the