CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED/EFFECTIVE
00 OCT 25 AM 8:55
SECRETARY OF STATE
STATE OF IDAHO

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 the undersigned use(s) in the transaction of business is:

   WILLIS DISTRIBUTING

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
ROBERT R WILLIS	1225 NO. 3RD WEST MTN Home ID 83647
LOETA SUE WILLIS	1225 NO 3RD WEST MTN. HOME ID 83647

3. The general type of business transacted under the assumed business name is: (mark only those that apply)

   - [x] Retail Trade
   - [ ] Wholesale Trade
   - [x] Services
   - [ ] Manufacturing
   - [ ] Agriculture
   - [ ] Construction
   - [ ] Transportation and Public Utilities
   - [ ] Finance, Insurance, and Real Estate
   - [ ] Mining

4. The name and address to which future correspondence should be addressed:

   LOETA SUE WILLIS
   1225 NO 3RD WEST
   MTN HOME ID 83647

   Phone number (optional): (208) 587-1129

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of Assumed Business Name and $20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: Loeta Sue Willis
Printed Name: LOETA SUE WILLIS
Capacity: PARTNER
(see instruction # 8 on back of form)

Revision 2/97

Secretary of State use only

IDAHO SECRETARY OF STATE
10/25/2000 09:00
CK: 3067 CT: 114232 BH: 356802
1 @ 20.00 = 20.00 ASSUM NAME # 2

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