## CERTIFICATE OF ASSUMED BUSINESS NAME

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.

<ol> <li>The assumed business name which the business is:</li> </ol>	he undersigned use(s) in the transaction of
	INSURANCE SERVICES OF ITMANO FACE
The true name(s) and business addre- business under the assumed business	ss(es) of the entity or individual(s) daing as name is/are:
VIRGIL L. ALBERTSON	Address 171 JEFFERSON POCATELLO ID 83201
THOMAS V. MURPHY	1335 E. 17TH IDAHO FALLS ID 83401
3. The general type of business transacte  P+C INSURANCE	ed under the assumed business name is:
See categories on the reverse  4. The name and address to which corresponder of Mariety Disura	IKE SERVICES OF IDAYO FALLS
PO. Box 1492 IDAHO FACE	5 In 83
Signed	Virgil albutano 4/9/91
Ву	VIRGIL ALBERTSON
Capacil	LY GEN PARTHER
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 STATE  DATE 04/14/1997  0900 82286 2  CX #: 4920 CUST# 79739