	P.02/03
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CERTIFICATE OF	ASSUMED	BUSINESS	NAME
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CERTIFICATE OF ASSOCI	ALD DOON TOO IT WILL		
ARTHUR AN ARTHUR ATTENDED	DAHO FEB ZI 10 22 AN 197		
To the SECRETARY OF STATE, STATE OF II Pursuant to Section 53-504, Idaho Code	the undersigned gives notice of		
adoption of an Assumed Business Name.	SESSE TATE OF THE STATE OF THE		
-	11		
1. The assumed business name which the un	dersigned use(s) in the transaction of		
business is:  Fower House By	the ? (Trull		
TOWORC (10 000 C			
2. The true name(s) and business address(es	of the entity or individual(s) doing		
The true name(s) and business address(es business under the assumed business name).	e is/are:		
Manage	Address		
Lamalass (Name of Till	120 E. Lita St. SANDPOINT		
FIGHTE USS CONJONES, TENE	50 Auto 62 8 Call		
	10AHO, 63807		
	#21		
3. The general type of business transacted ur	nder the assumed business name is:		
3. The general type of business transacted to			
Coltainant			
See categories on the revente			
946 Crindonies du ma (aseres			
	denne abould he addressed		
4. The name and address to which correspondence should be addressed:			
Scott Haynes, 4015 Pine ST.			
SAIMOUNT, DD, 83864			
ANUPOINT 100			
	n. AATW		
Signed	MV (4		
SCOTT HAYNES!			
By 1			
Capacity_	- ren ourt		
Submit Certificate of Assumed	Customer #		
Business Name and \$20.00 fee to:			
the reference are storing a second se	Secretary of State use only		
Secretary of State	*		
700 West Jefferson	1		
PO Box 83720	[2		
Bolse ID 83720-0080	HIGHO SECRETARY OF STATE		
	DATE 02/21/1997		
	0900 66103 2 0x 1: 1 0x 12 76941		
	1 a		