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 gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the comparation of the business is:				
	2.	 The true name(s) and business address(es) of the entity or individual(s) doin business under the assumed business name is/are: 		
		Name	Com	plete Address
, J		W 1189/	388 Harri	st meridion Id 83142
	3.	The general type of business transacted under the assumed business name is: (mark only those that apply)		
	4.	Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining The name and address to which future Phone number (optional)		
2	5.	388 H-++15 St	Г	Submit Certificate of
En MS		Meridian Idahi 83642		Assumed Business Name and \$20.00 fee to:
		Name and address for this acknowledgme copy is (if other than # 4 above):	nt	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		<u>S-mc</u>		Secretary of State use only
			12/99	IDAHO SECRETARY OF STATE
Signature: Vennutin Willert			.X3 Revision 12/99	5/12/2000 09:00 494 CT: 130987 BH: 317387
Signature: <u>Jennifin Willett</u> Printed Name: <u>Jennific Willett</u>			1	9 29.00 = 20.00 ASSUM NAME # 2
Capacity: <u>member</u> (see instruction # 8 on back of form)			g kcorpformstabn.p65	D35782

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