Capacity: Business Nuner

(see instruction # 8 on back of form)

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.  STATE OF 104 18: 39  1. The assumed business name which the undersigned use(s) in the transaction of AHO business is:	
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	
Sherian Allen	P.O. Box 140374  Garden City, ID 83714
3. The general type of business transacted under the assumed business name is:  (mark only those that apply)  Retail Trade	
4. The name and address to which future correspondence should be addressed:  Sherian Allen P.O. Box 140374  Garden City, ID 83714	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State
5. Name and address for this acknowledgm copy is (if other than #4 above):	700 West Jefferson
	Secretary of State use only  Secretary of State use only  Secretary of State use only  Secretary of State use only
Signature:	- STATE APPRICATION OF STATE
Printed Name: Sherian L. Allen	11/07/2000 09:00 8 CK: NO CK # CT: 138221 BH: 35959

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1 @ 20.00 = 20.00 ASSUM NAME # 2