

CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2003 SEP 30 AM 9: 24

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Please type or print legibly.
NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

INDEPENDE	NT RETAIL SERVICE
The true name(s) and business address(es business under the assumed business nam	s) of the entity or individual(s) doing ne: Complete Address 609 HOGAN ST COTTONWOOD ID. 83522
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction	nder the assumed business name is:
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: DAVID KNAPPERT	Secretary of State 700 West Jefferson Basement West PO Box 83720
609 HOGAN COTTONWOOD ID 83522	Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgme copy is (if other than # 4 above): 	nt Phone number (optional): 1-208-962-7387
	Secretary of State use only
rinted Name: DAVID KNAPPENT Capacity/Title: OWNER	IDAHO SECRETARY OF STATE ### ### ############################