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CERTIFICATE OF ASSUMED BUSINESS N Pursuant to Section 53-504, Idaho Code, the u submits for filling a certificate of Assumed Busin Please type or print legibly. NOTE: See instructions on reverse before the	ness Name, SECRETARY OF STATE
I. The assumed business name which the under business is: Mountain	
2. The true name(s) and business address(es) of business under the assumed business name: Name Mountain West Components, Inc.	of the entity or individual(s) doing Complete Address 430 West Nez Perce, Jerome, ID 83338
 3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Mountain West Components, Inc. PO Box 482 Jerome, ID 83338 5. Name and address for this acknowledgmet copy is (if other than #4 above): 	And Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: Orinted Name: Lynn Dille Capacity/Title: Owner (see instruction # 8 on back of form)	10AHO SECRETARY OF STA 04/11/2007 05 CK: 1189589 CT: 172899 BH: 1 2 25.06 = 25.06 ASSUM

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