

Printed Name:

Capacity/Title: Solc

(see instruction # 8 on back of form)

ASSUMED BUSINESS NAME FILED EFFECTIVE Fursuant to Section 53-504. Idaho Codo 45-**CERTIFICATE OF**

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2005 JAN 19 AM 9:00

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

SCHOLTART L SAIL STATE OF IDAHO

IDAHO SECRETARY OF STATE 61/20/2005 05:00 CK: 186 CT: 158818 BH: 788174 1 8 25.80 = 25.80 ASSUM NAME # 2

The true name(s) and business address(business under the assumed business names)	undersigned use(s) in the transaction of es) of the entity or individual(s) doing
_ Name	Complete Address
Robert Strond	4900 Browne Spur DR
	Nampa, ID AJ687
The general type of business transacted Retail Trade Transportati Wholesale Trade Services Agriculture	on and Public Utilities n
Manufacturing Mining	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Robert Strond 4900 Bronze Spur DR Nampa ID 83687	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgn copy is (if other than # 4 above);	nent Phone number (optional):
	Secretary of State use only