CERTIFICATE OF ASSUMED E (Please type or print legi	SUSINESS NAME
To the SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Co- gives notice of adoption of an Assume	de, the undersigned of Business Name.
1. The assumed business name which the u business is: Hanes Water Well Dril	
The true name(s) and business address(s business under the assumed business na Name	ame is/are: <u>Complete Address</u>
MACCIA HAZNES	4127 Good Lane, Newflynesth Fr
The general type of business transacted (mark only those that apply)	under the assumed business name is:
Retail Trade Manufactur Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
4. The name and address to which future correspondence should be addressed: Alar Drawcast by Icla NC	Submit Certificate of Assumed Business Name and \$20.00 fee to:

5. Name and address for this acknowledgment copy is (if other than # 4 above).

Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301

Secretary of State use only

Signature: Marvin Haine

Printed Name: MARUIN HAINES

Capacity: Ouner

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

03/15/1999 09:00 CK: NO CK # CT: 81212 BH: 197161

1 0 20.90 = 29.00 ASSUM MAKE # 2

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