CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO Ell co

<u>روټ</u> ي	Pursuant to Section 53-504, Idah gives notice of adoption of an Ass	o Code, the undersigned sumed Business Name # 411 8: 49
1.	The assumed business name which the und business is: North Idaho Hir Com,	ST. J.E. C. HOAHO
2.	The true name(s) and business address(es) business under the assumed business name Name Joseph L. Hod (, TII	of the entity or individual(s) doing
		15t Taus, 10 83854-1622
3.	The general type of business transacted und (mark only those that apply)	der the assumed business name is:
	Retail Trade	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future Properties of the properties	none number (optional): <u>773-8273</u>
	397 Forest Glen Blud.	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5 .	Post Falls, ID 83854-9622 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
gnatu		IDAHO SECRETARY OF STATE 11/04/1998 09:00 CK: 1154 CT: 106382 BH: 158739 1 0 28.88 28.88 ASSUM NAME # 2
inted	Name Joseph L. Hode TIE	7 E CO-SO . CO-SO HOOM WHEN H C.

Sig Capacity: Owner (see instruction # 8 on back of form)

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