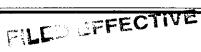


CERTIFICATE OF



Pursuant to Section 53-504, Idaho Code, the undersigne 2003 JUN 19 AM 9: 11 submits for filing a certificate of Assumed P. submits for filing a certificate of Assumed Business Name.

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

(see instruction # 8 on back of form)

STATE OF IDAHO

1. The assumed business name which the undersit business is: Shawnark Recycles	_
The true name(s) and business address(es) of to business under the assumed business name: Name	he entity or individual(s) doing Complete Address
Alfred M. HAAS	624 MAPLE PL
	HAYder ID. 83855
3. The general type of business transacted under to 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: AHRED M-HMS 624 Maple PL HANDE PL	
 Name and address for this acknowledgment copy is (if other than # 4 above). 	Phone number (optional): 208-660-6383
	Secretary of State use only
Signature: Capacity/Title: Owner Signature: Alfned M. H. Ass Capacity/Title: Owner	IDAHO SECRETARY OF STATE
Printed Name: Alfred M-Has	IDAHO_SECRETARY_OF_STATE
Capacity/Title: Owner gas	66/27/2003 05:00 CK: 619 CT: 158810 BH: 688231 1 0 25.00 = 25.00 ASSUM NAME #