CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 APR 16 AM 9: 04

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is: \[\(\lambda \text{R} \in \text{R} \text{Diwer} \)	
2. The true name(s) and business address(es) of business under the assumed business name: Name Charlene Brown P	f the entity or individual(s) doing Complete Address O.B.X 174 Terreton, Td. 83450
The general type of business transacted under	r the assumed business name is:
Retail Trade Transportation ar Wholesale Trade Construction	nd Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Charlene Brown P.O. Box 174 Terreton, Td. 8345	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above). 	Phone number (optional): (208)663-438/
	Secretary of State use only
Signature: Manager Signature required)	1DAHO SECRETARY OF STATE 24/16/2004 95:00 CX: 3668 CT: 158819 BH: 739664
Printed Name: Charlene Brown	IDAHO SECRETARY OF STATE
Capacity/Title: CPRQ TOR (see instruction # 8 on back of form)	24/16/2004 05:00 CX: 3668 CT: 158919 BH: 739664 1 0 25.00 = 25.00 ASSUM NAME (