

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

APR 29 12 39 PM '99

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

C & L INK

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Complete Address

DALE M. CLAIBORNE

2209 CALDWELL BLVD. #40 NAMPA, ID

ROBERT C LYNCH

717 REDWOOD LANE NAMPA ID
83651

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed:

Phone number (optional): 463-8110

C & L INK
717 REDWOOD LANE
NAMPA ID 83651

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

SAME

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

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

Secretary of State use only

Signature:

Robert C Lynch

Printed Name:

ROBERT C LYNCH

Capacity:

General Partner

(see instruction # 8 on back of form)

Revision 2/97

g:\corp\format\abn.pms

IDAHO SECRETARY OF STATE

DATE 04/29/1997

0900 87555 2

CK #: 9222 CUST# 80640

ASSUM NAME 10 20.00= 20.00

: D