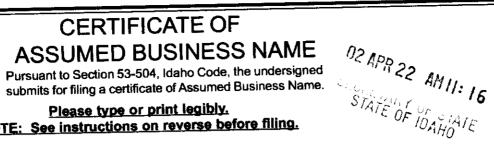
NOTE: See instructions on reverse before filing.



The assumed business name which the under	ersigned use(s) in the transaction of
business is:  FIED LER TECHNICAL	MALKI ZOLVOUS
FIEDLER PECHNICAL	JEISTICES MILES
2. The true name(s) and <u>business</u> address(es) or business under the assumed business name:	
<u>Name</u>	Complete Address
DANIEL J. FIEDLER	P.O. Box 24  DRIGGS, Idaho  83422
	DRIGOS, Idaho
	83422
3. The general type of business transacted und	
Retail Trade	Di con a complement (continue di) t
Signature: <u>Janual</u> <u>Jacobler</u> Printed Name: <u>DANIEL</u> J. FIEDLER  Capacity/Title: <u>OWNER</u> (see instruction #8 on back of form)	Secretary of State use only  980-1008

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