CERTIFICATE OF ASSUMED BUSINESS NA

To 1	the	SECRETA	RY OF	STATE.	STATE	OF	IDAHO
------	-----	----------------	-------	--------	-------	----	-------

Boise ID 83720-0080

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

1.	The assumed business name which the undersigned use(s) in the transaction of business is:					
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 Address					
	Thomas P. Jakubik	1395 South Ammon Road Idaho Falls, ID 83406				
3.	The general type of business transacted under the assumed business name is: Wholesale Trade					
4.	The name and address to which corresponds on the reverse Thomas P. Jakubik 1395 South Ammon Road.	ndence should be addressed: Idahafalls, IO 83,406				
	Signed The Proprietor					
	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State	Customer # Secretary of State use only Secretary OF STATE				
	700 West Jefferson PO Box 83720	11/43/1998 69:66				