CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of		
ad	loption of an Assumed Business Name.	STATE OF THE
1.	The assumed business name which the u 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
	Shown Kecklan	602 West Highway 30
3.	The general type of business transacted u	nder the assumed business name is:
	See categories on the reverse	
4. The name and address to which correspondence should be addressed: Shown Kechen, 600 west blighway 30 Bunkey Slaho 83318 Signed Signed		
Ву		
Capacity Owner/Manager		
	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080	Customer # Secretary of State use only IDAHO SECRETARY OF STATE DATE 02/11/1997 0900 63323 2 CK #: 875 CUST# 76417 ASSUM NAME 18 20.00= 20.00