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 4 31 PH 100 gives notice of adoption of an Assumed Business Name

business is:	ich the undersigned use(s) in the transaction of
<u>Classic TILe</u>	
The true name(s) and business ac business under the assumed busi	ddress(es) of the entity or individual(s) doing iness name is/are:
<u>Name</u>	Complete Address
Tim Shea	418 Pueblo St. Boise Id
The general type of business trans (mark only those that apply)	sacted under the assumed business name is:
Wholesale Trade Agric	ufacturing Transportation and Public Utilities culture Finance, Insurance, and Real Estates struction Mining
4. The name and address to which fu	uture Phone number (optional):
correspondence should be addres	ssed:
418 Pueblo St. Bois	Submit Certificate of Assumed Business Name and \$20.00 fee to:
	Secretary of State
5. Name and address for this acknow	700 West Jefferson West Jefferson Basement West
COPY IS (if other than # 4 above).	PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only IDAHO SECRETARY OF STATE
nature: Lim Slea	IDAHO SECRETARY OF STATE 12/13/2000 09:00 CK: CASH CT: 139559 RH: 366278
nted Name: Tim Shew	1 0 20.00 = 20.00 ASSUM NAME # 2
pacity:	— Sod D 1 11 4 3
(see instruction # 8 on back of form)	