CERTIFICATE OF ASSUMED BUSINESS (Please type or print legibly. See instructions on revers	NAME (
To the SECRETARY OF STATE, STATE OF IDAHO 97, Pursuant to Section 53-504, Idaho Code, the undersign gives notice of adoption of an Assumed Business Name 17, 17, 17, 17, 17, 17, 17, 17, 17, 17,	Med / AM 10: 02
The assumed business name which the undersigned use business is:  LES ENERDISES	(s) In the transaction of
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:      Complete Address	
LEOMARD TOHNSON P.Q. BOX	KAMI AH 3 D
SUZANDE M. JOHNSON P.O. BOX	482 KAMIAH 5083536
<ol> <li>The general type of business transacted under the assumed business name is: (mark only those that apply)</li> </ol>	
	nsportation and Public Utilities ince, Insurance, and Real Estate ing
4. The name and address to which future Correspondence should be addressed:	
Leonard T. JOHNSON	Submit Certificate of
P.O. BOX 1482	Assumed Business Name and \$20.00 fee to:
KAMIAH ID 83536	Secretary of State
5. Name and address for this acknowledgment	700 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
Š	INCHO SECRETARY OF STATE
of Takana	98/11/1997 69:96 (X: 1942 CT: 64732 BH: 28664

Signature: <u>demand</u> T. JOHNSON Printed Name: Leonard Capacity: ORINGOM+

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