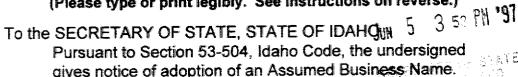
Capacity: Owner

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)





1.	gives notice of adoption of an Assum The assumed business name which the	undersigned use(s) in the transaction of
	MICHAE ( Anthony & Company World	
2.	The true name(s) and business address business under the assumed business name  Name  Michael Anthony Woodall	
3.	The general type of business transacted (mark only those that apply)	d under the assumed business name is:
	Retail Trade Manufactu Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate on Mining
4.	The name and address to which future correspondence should be addressed:	Phone number (optional):(208) 343-2144
,	MICHAEL Anthony Woodall 1705 N. 14 th Street	Submit Certificate of Assumed Business Name and \$20.00 fee to:
_	Boise, Idaho 83702	Secretary of State 700 West Jefferson
5.	Name and address for this acknowledge copy is (if other than # 4 above):	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		Secretary of State use only
Signati	ure: Mika/N. Woodall	IDAHO SECRETARY OF STATE  DATE 06/06/1997  0900 99431 2
Printed	ure: Michael A. Woodall	CK #: cash CUST# 82492  E ASSUM NAME 10 20.00= 20.00