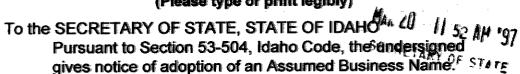
CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)





gives notice of ado	ption of an Assume	ed Business N	arne: SiviE		
 The assumed busines business is: 		_	se(s) in the transact	ion of	
	got Stam	05!			
	J			- 1	
The true name(s) and business under the as			y or individual(s) do	ing	
<u>Nam</u>	<u>Name</u>		Complete Address 1521 FIVE Mile Rd.		
Cindy Mam Der		Stades Obekbal Ref.			
		Megda	n Idahu 80	692	
3. The general type of bu	usiness transacted (めらうと under the assu	ング umed business nam	37 <i>0</i> 9 ne is:	
Retail Trade Wholesale Trade Services	Manufacturi Agriculture Construction	Fir	ansportation and Pr nance, Insurance, a ning	1	
4. The name and address correspondence shou			Submit Certificate Assumed Busine Name and \$20.0	ss	
5. Name and address for copy is (if other than # 4 abor			Secretary of Stat 700 West Jeffers Basement West PO Box 83720 Boise ID 83720-0	on	
Cindy Ka	mper		208 334-2301 Secretary of State us	se only	
3690 W. Ol Olegidian Signature: Exnal Ka	ICRIAND RA John 83612 Man	Revision 2/87	DATE	9 SECRETARY OF STATE 03/20/1997 75038 2 0.671 78558	
Printed Name: Cikay K	imper	bn.pm6	ASSUM NAME	10 50.00= 50.00	
Capacity:		lais u.s.			
(see instruction # 8 on ba	ack of form)	g.\corp\forms\abn.pm6	#: D		