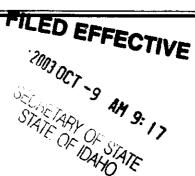


CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.



NOTE. See instructions on reverse before	DALSTATE
1. The assumed business name which the under business is:	Q ,
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Name Make Make	
3. The general type of business transacted und	er the assumed business name is:
Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above): BANK OF AMERICA	Phone number (optional): 28-818-2337
357 W. Canfield	Secretary of State use only
Signature: Len Hand. Signature: Len Hand. (signature required) Printed Name: Kevin K. Smith Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 10/09/2003 05:00 CK: 9780131088 CT: 158010 BH: 705817 1 @ 25.00 = 25.00 ASSUM NAME # 2

D 69584