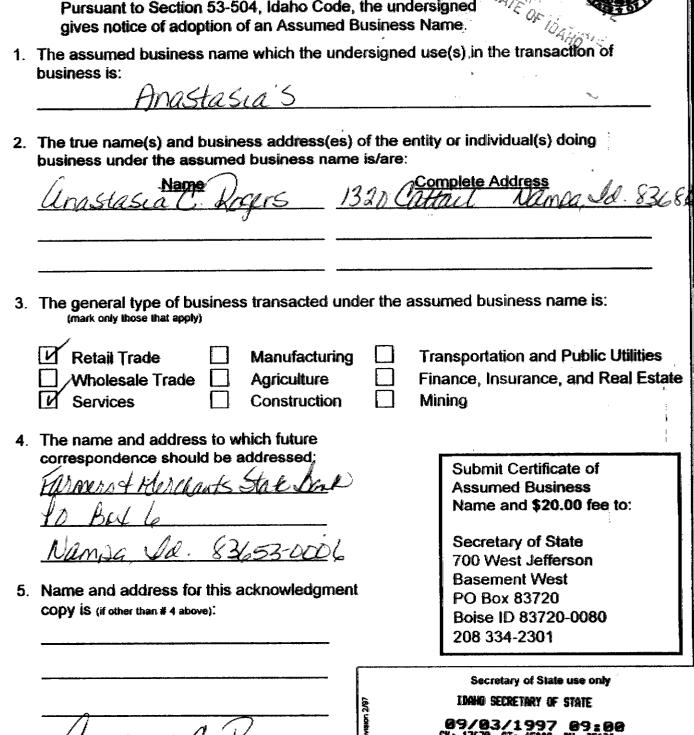
## CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned



Signature:/\_/

Printed Name: ANASTASIA

Capacity:

(see instruction # 8 on back of form)

09/03/1997 09:00 CK: 17670 CT: 45880 BH: 35138

1.0 28.00 = 20.00 ASSUM NAME

D7724